



FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20461

DEC 23 1983

Mr. Mitch McConnell
P.O. Box 1496
Louisville, KY 40201

Dear Mr. McConnell:

This letter constitutes formal written notification that the McConnell Senate Committee filed a 1983 Mid-Year Report with the Commission and appears to be receiving contributions and/or making expenditures in support of your candidacy in excess of \$5,000. Commission regulations define a "candidate" as "... an individual who seeks nomination for election, or election, to Federal office, whenever any of the following events occur:

(1) The individual has received contributions aggregating in excess of \$5,000 or has made expenditures aggregating in excess of \$5,000.

(2) The individual has given his or her consent to another person to receive contributions or make expenditures on behalf of that individual and such person has received contributions aggregating in excess of \$5,000 or made expenditures aggregating in excess of \$5,000.

(3) After written notification by the Commission that any other person has received contributions aggregating in excess of \$5,000 or made expenditures aggregating in excess of \$5,000 on the individual's behalf, the individual fails to disavow such activity by letter to the Commission within 30 days receipt of the notification." (11 C.F.R. 100.3(a))


You have thirty days from receipt of this notification to disavow these activities. To disavow send a letter directly to the Commission at the above address, marked Attention: Reports Analysis Division, stating that you are not a candidate for Federal Office and that you have not authorized the solicitation of contributions nor the making of expenditures on your behalf.

If you do not disavow these activities, you should file a statement of candidacy (FEC Form 2) within 15 days of the date you become a candidate. (11 CFR 101.1(a))

0 3 0 3 2 9 9 1 8 0 7

If you have any further questions, please contact our Reports Analysis Division on the toll-free number (800) 424-9530. Our local number is (202) 523-4048.

Sincerely,



Peter Kell, Jr.
Chief, Authorized Branch
Reports Analysis Division

0 3 0 3 2 9 9 4 6 0 8

1/30/84

RECEIVED
SECRETARY OF THE SENATE
1984 JAN 24 PM 2:30
HAND DELIVERED ☒

C KY REP C1494

STATEMENT OF CANDIDACY

(see reverse side for instructions)

| | |
|--|--|
| 1. (a) Name of Candidate (in Full) Mitch McConnell | 2. Identification No. |
| (b) Address (Number and Street) 1941 Bishop Lane, Suite 411 | 3. Party Affiliation Republican |
| (c) City, State and ZIP Code Louisville, Kentucky 40218 | 4. Office Sought United States Senate |
| | 5. District & State of Candidate Kentucky |

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

6. I hereby designate the following named political committee as my Principal Campaign Committee for the 1984 election(s).
(Year of Election)

NOTE: This designation must be filed with the appropriate office listed below.

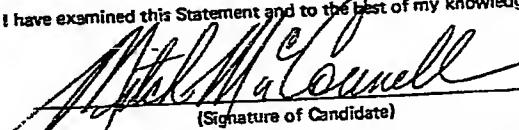
| |
|--|
| (a) Name of Committee (in Full) McConnell Senate Committee |
| (b) Address (Number and Street) 1941 Bishop Lane, Suite 411 |
| (c) City, State and ZIP Code Louisville, Kentucky 40218 |

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

7. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

| |
|---|
| NOTE: This designation should be filed with the principal campaign committee. |
| (a) Name of Committee (in Full) |
| (b) Address (Number and Street) |
| (c) City, State and ZIP Code |

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.


(Signature of Candidate)

1/19/84
(Date)

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

CANDIDATES FOR -
President mail to:

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

U.S. Senate mail to:

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

U.S. House of Representatives

mail to:
Clerk of the House
1036 Longworth Office Bldg.
Washington, D.C. 20515

For further
information
contact:

Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|

FEC FORM 2 (3/80)

ch
McConnell
U.S. Senate

x 1496
e, Kentucky 40201



Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

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WILLIAM F. HILDENBRAND
SECRETARY

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

ALICIA RAE FISHER
SUPERINTENDENT

118 D STREET, N.E.
ROOM A-623
WASHINGTON, D.C. 20510
PHONE 202-224-0322

THE PRECEDING REPORT WAS RECEIVED: Jan. 20, 1984

 CERTIFIED

 REGISTERED

 FEDERAL EXPRESS

 EXPRESS MAIL

8402110960

STATEMENT OF CANDIDACY

(see reverse side for instructions)

RECEIVED
CLERK OF THE SENATE

1984 MAY 17 PM 1:20

| | |
|---|---|
| 1. (a) Name of Candidate (in Full) <u>Mitch McConnell</u> | 2. Identification No. <u>1984 MAY 17 PM 1:20</u> |
| (b) Address (Number and Street) <u>1941 Bishop Lane, Suite 411</u> | 3. Party Affiliation <u>Republican</u> |
| (c) City, State and ZIP Code <u>Louisville, Kentucky 40218</u> | 4. Office Sought <u>United States Senate</u> |
| | 5. District & State of Candidate <u>Kentucky</u> |

HAND DELIVERED ☒

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

6. I hereby designate the following named political committee as my Principal Campaign Committee for the 1984 election(s).
(Year of Election)

NOTE: This designation must be filed with the appropriate office listed below.

| |
|---|
| (a) Name of Committee (in Full) <u>McConnell Senate Committee</u> |
| (b) Address (Number and Street) <u>1941 Bishop Lane, Suite 411</u> |
| (c) City, State and ZIP Code <u>Louisville, Kentucky 40218</u> |

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

7. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

| |
|---------------------------------|
| (a) Name of Committee (in Full) |
| (b) Address (Number and Street) |
| (c) City, State and ZIP Code |

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Mitch McConnell 5-15-84
(Signature of Candidate) (Date)

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

CANDIDATES FOR -

President mail to:

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

U.S. Senate mail to:

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

U.S. House of Representatives
mail to:

Clerk of the House
1036 Longworth Office Bldg.
Washington, D.C. 20515

For further
information
contact:

Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
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FEC FORM 2 (3/80)

84020110097

84020110090

RECEIVED
LIBRARY OF THE SENATE

~~1904 DEC 11 AM 2 04~~

~~HAND DELIVERED~~

1990

(Year of Election)

(a) Name of Committee (in Full)

(b) Address (Number and Street)

(c) City, State and ZIP Code

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

NOTE: This designation should be filed with the principal campaign committee.

(b) Address (Number and Street)

(c) City, State and ZIP Code


(Signature of Candidate)

(Date)

CANDIDATES FOR —
President mail to:

U.S. Senate mail to:

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

U.S. House of Representatives
mail to:

Clerk of the House
1036 Longworth Office Bldg.
Washington, D.C. 20515

**For further
information
contact:**

Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|

FEC FORM 2 (3/80)

84020300509

STATEMENT OF ORGANIZATION

(see reverse side for instructions)

| | | |
|---|---|--|
| 1. (a) Name of Committee (in Full) McConnell Senate Committee '90 | <input type="checkbox"/> Check if name or address is changed. | 2. Date December 14, 1984 |
| (b) Address (Number and Street) P. O. Box 1496 | | 3. FEC Identification Number 1984 DEC 17 PM 2:04 |
| (c) City, State and ZIP Code Louisville, Kentucky 40201 | | 4. Is this an amended statement? NO |

5. TYPE OF COMMITTEE (check one).

- ☒ (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- ☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | | | | |
|---|--|-------------------------------------|-----------------------------|
| Mitch McConnell Name of Candidate | Republican Candidate Party Affiliation | U.S. Senate Office Sought | KY State/District |
|---|--|-------------------------------------|-----------------------------|
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (e) This committee is a separate segregated fund.
- ☐ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund nor a party committee.

| 6. Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code | Relationship |
|---|------------------------------|--------------|
| | | |

If the registering political committee has identified a "connected organization" above, please indicate type of organization:

- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position, the person in possession of committee books and records.

| Full Name | Mailing Address and ZIP Code | Title or Position |
|---------------------------|--|-------------------|
| Larry J. Steinberg | c/o Touche Ross & Co. 510 W. Broadway, Louisville, KY 40202 | Treasurer |

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

| Full Name | Mailing Address and ZIP Code | Title or Position |
|---------------------------|---|-------------------|
| Larry J. Steinberg | c/o Touche Ross & Co. 510 W. Broadway Louisville, KY 40202 | Treasurer |

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

| Name of Bank, Depository, etc. | Mailing Address and ZIP Code |
|--------------------------------|---|
| Liberty National Bank | P. O. Box 32500 Louisville, KY 40232 |

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Larry J. Steinberg

Type or Print Name of Treasurer

Larry J. Steinberg
SIGNATURE OF TREASURER

December 14, 1984

Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

For further information contact:

Federal Election Commission, Toll Free 800-424-9530, Local 202-523-4068

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

FEC FORM 1 (3/80)

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

 Date of Receipt

☐ INSIDE MAIL

 Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

 Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

 Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

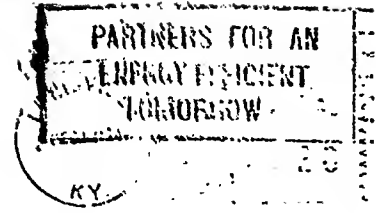
Dec. 14, 1984

 AND OR DATE OF RECEIPT

84020300511

he Ross & Co.

510 West Broadway
Louisville, Kentucky 40202



Public Record

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

94529307512

S-3153

REPORTS OF RECEIPTS AND DISBURSEMENTS For Authorized Committee

KY REP C 1494

(Summary Page)

RECEIVED.
SECRETARY OF THE SENATE

ALIGN AREA

1. Name of Committee (in Full)
McConnell Senate Committee2. FEC Identification Number
C00155051

Address (Number and Street)

P. O. Box 1496

3. Is this Report an Amendment?
☐ YES ☒ NO

City, State and Zip Code

Louisville, KY 40201

☐ Check if address is different than previously reported.

4. TYPE OF REPORT

☐ April 15 Quarterly Report☐ Twelfth day report preceding _____
(Type of Election)☐ July 15 Quarterly Report

election on _____ in the State of _____

☐ October 15 Quarterly Report☐ Thirtieth day report following the General Election on _____☒ January 31 Year End Report

_____ in the State of _____

☐ July 31 Mid Year Report (Non-election Year Only)☐ Termination ReportThis report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period July 1, 1983 through December 31, 1983

COLUMN A
This PeriodCOLUMN B
Calendar Year-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions (other than loans) (From Line 11 (e))

154,958

346,564

(b) Total Contribution Refunds (from Line 20 (d)).

4,000

4,000

(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))

150,958

342,564

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17).

147,024

185,613

(b) Total Offsets to Operating Expenditures (from Line 14).

147,024

185,613

(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a)).

390,711

8. Cash on Hand at Close of Reporting Period (from Line 27)

9. Debts and Obligations Owed TO The Committee
(Itemize all on Schedule C or Schedule D).

10. Debts and Obligations Owed BY The Committee
(Itemize all on Schedule C or Schedule D).

166,229

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steinberg

Type or Print Name of Treasurer

SIGNATURE OF TREASURER

January 31, 1984
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

94020030101

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

| Name of Committee (in Full) | | Report Covering the Period: | | |
|--|---------|-------------------------------|-----------------------------------|--------|
| McConnell Senate Committee | | From: July 1, 1983 | To: December 31, 1983 | |
| | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | |
| I. RECEIPTS | | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | 131,988 | 321,344 | | 11 (a) |
| (Memo Entry Unitemized \$ 25,741) | | | | |
| (b) Political Party Committees | 15,120 | 15,120 | | 11 (b) |
| (c) Other Political Committees | 7,850 | 10,100 | | 11 (c) |
| (d) The Candidate | | | | 11 (d) |
| (e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)). | 154,958 | 346,564 | | 11 (a) |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | | 12 |
| 13. LOANS: | | | | |
| (a) Made or Guaranteed by the Candidate | | | | 13 (a) |
| (b) All Other Loans | | | | 13 (b) |
| (c) TOTAL LOANS (add 13 (a) and 13 (b)). | | | | 13 (c) |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | | | 14 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 14,445 | 24,174 | | 15 |
| 16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15) | 169,403 | 370,738 | | 16 |
| II. DISBURSEMENTS | | | | |
| 17. OPERATING EXPENDITURES | 147,024 | 185,613 | | 17 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | | 18 |
| 19. LOAN REPAYMENTS: | | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | | | 19 (a) |
| (b) Of All Other Loans | | | | 19 (b) |
| (c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)) | | | | 19 (c) |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | | | |
| (a) Individuals/Persons Other Than Political Committees | 1,000 | 1,000 | | 20 (a) |
| (b) Political Party Committees | | | | 20 (b) |
| (c) Other Political Committees | 3,000 | 3,000 | | 20 (c) |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c)) | 4,000 | 4,000 | | 20 (d) |
| 21. OTHER DISBURSEMENTS | 3,000 | 3,000 | | 21 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21) | 154,024 | 192,613 | | 22 |
| III. CASH SUMMARY | | | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | 375,332 | | 23 |
| 24. TOTAL RECEIPTS THIS PERIOD (From Line 16) | \$ | 169,403 | | 24 |
| 25. SUBTOTAL (Add Line 23 and Line 24) | \$ | 544,735 | | 25 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) | \$ | 154,024 | | 26 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) | \$ | 390,711 | | 27 |

84020030102

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications, Inc. 456 West 43rd Street New York, NY 10036 | 76,000 | 54,795 | 59,454 | 71,341 |
| Nature of Debt (Purpose): Media & campaign consulting & production | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, KY 40299 | 1,906 | 428 | 2,334 | --- |
| Nature of Debt (Purpose): Printing | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Shively Newsweek, Inc. 4939 Dixie Highway Shively, KY 40216 | 703 | 896 | 1,599 | --- |
| Nature of Debt (Purpose): Printing | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202 | 1,424 | 5,254 | 6,678 | --- |
| Nature of Debt (Purpose): Computer programming and services | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | --- | 24,035 | 1,763 | 22,272 |
| Nature of Debt (Purpose): Office rent | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commercial Office Suppliers, Inc. 433 E. Market Street Louisville, KY 40202 | --- | 655 | 121 | 534 |
| Nature of Debt (Purpose): Office Supplies | | | | |
| | | | | 94,147 |
| 1) SUBTOTALS This Period This Page (optional) | | | | |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

94020030103

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Odell, Roper & Assos., Inc. 7316 Wisconsin Avenue, Suite 507 Bethesda, MD 20814 | --- | 78,961 | 14,961 | 64,000 |
| Nature of Debt (Purpose): Promotional mailing | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Blvd. Louisville, KY 40299 | --- | 9,218 | 1,136 | 8,082 |
| Nature of Debt (Purpose): Office equipment rental & purchase | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 72,082 |
| 2) TOTAL This Period (last page this line only) | | | | 166,229 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) AND 3) TO REPORT TO APPROPRIATE COMMITTEE OF SUMMARY PAGE (last page only) | | | | 166,229 |

84020030104

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 22 for
LINE NUMBER 11 A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
|---|--|--|---|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Dr. Irvin Abell, Jr. Mockingbird Valley Road Louisville, KY 40207 | | Name of Employer Self | Date (month, day, year) 12-01-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Doctor | Amount of Each Receipt This Period \$1000.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. R. S. Adams P. O. Box 99615 Louisville, KY 40299 | | Name of Employer Mover Packaging, | Date (month, day, year) 7-06-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation President | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. James G. Apple 2942 Lexington Road Louisville, KY 40206 | | Name of Employer Self | Date (month, day, year) 12-06-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Attorney | Amount of Each Receipt This Period \$300.00 |
| | | 10-24-83 \$200.00 | |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Joseph L. T. Ardery 97 Warrior Road Louisville, KY 40207 | | Name of Employer None | Date (month, day, year) 12-28-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Homemaker | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Charles W. Arnold, Jr. 13905 Harbor View Court Prospect, KY 40059 | | Name of Employer A. Arnold & Son | Date (month, day, year) 7-28-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation President | Amount of Each Receipt This Period \$1000.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Frank H. Arnold, Sr. 1521 Sylvan Court Louisville, KY 40205 | | Name of Employer Prudential Heating & Air | Date (month, day, year) 12-28-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation President | Amount of Each Receipt This Period \$50.00 |
| | | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Asenah Averyt P. O. Box 1365 Columbia, SC 29202 | | Name of Employer Self | Date (month, day, year) 12/27/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Investments | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional)..... | | | \$4050.00 |
| TOTAL This Period (last page this line number only) | | | |

94020030105

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 22 for
LINE NUMBER 11 A
(Use separate schedule for each
category of the Detailed
Summary Page)

| | | | |
|---|--------------------------------------|---|---|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Thomas K Baer 1816 Knollwood Road Louisville, KY 40207 | Name of Employer None | Date (month, day, year) 12-30-83 | Amount of Each Receipt this Period \$1000.00 |
| | Occupation Homemaker | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date-\$ 1000.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Bernard H. Barnett 1615 31st Street Washington, DC | Name of Employer Barnett & Alagia | Date (month, day, year) 7-08-83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation Attorney | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date-\$ 1000.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Cecil Clyde Barnett 318 Mockingbird Valley Road Louisville, KY 40207 | Name of Employer Tube Turns | Date (month, day, year) 12-08-83 12-12-83 | Amount of Each Receipt This Period \$350.00 \$1000.00 |
| | Occupation Executive | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Aggregate Year-to-Date-\$1850.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mr. Gilliam H. Barnett 318 Mockingbird Valley Road Louisville, KY 40207 | Name of Employer | Date (month, day, year) 12/09-83 | Amount of Each Receipt This Period \$500.00 |
| | Occupation | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date-\$ 700.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mr. John W. Barr III 16 River Hill Road Louisville, KY 40207 | Name of Employer First National | Date (month, day, year) 11-22-83 | Amount of Each Receipt This Period \$500.00 |
| | Occupation Banker | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date-\$ 500.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Jerry Barton 1103 Evergreen Road Louisville, KY 40223 | Name of Employer Belknap, Inc. | Date (month, day, year) 12/28/83 | Amount of Each Receipt This Period \$250.00 |
| | Occupation President | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date-\$ 250.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. John Bickel 2906 Cheyenne Drive Owensboro, KY 42301 | Name of Employer Self | Date (month, day, year) 12-12-83 | Amount of Each Receipt This Period \$250.00 |
| | Occupation Attorney | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date-\$ 250.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | \$4850.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030106

SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER 11 A
(Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|-------------------------------|-----------------------------------|------------------------------------|
| Mr. R. C. Billips Box 2666 Pikeville, KY 41501 | Peter Fork Mining | 12-01-83 | \$925.00 |
| | Occupation Coal Mine Oper. | 12-01-83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date-\$ 1925.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. R. C. Billips Box 2666 Pikeville, KY 41501 | None | 12-01-83 | \$1000.00 |
| | Occupation Homemaker | 12-01-83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date-\$ 2000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Allen Blacketer 816 Rugby Place Louisville, KY 40222 | self | 12-28-83 | \$800.00 |
| | Occupation Builder | 12-28-83 | \$700.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date-\$ 1500.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Joann Blacketer 816 Rugby Place Louisville, KY 40222 | Self | 12-28-83 | \$800.00 |
| | Occupation Realtor | 12-28-83 | \$700.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date-\$ 1500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Hilary Boone 1725 Walnut Hill Road Lexington, KY 40503 | Wimbledon Farm | 12-08-83 | \$1000.00 |
| | Occupation Horse Breeder | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Herb R. Booth 7621 Dixie Highway Florence, KY 41042 | Self | 12-30-83 | \$900.00 |
| | Occupation Doctor | 12-30-83 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date-\$ 1100.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Marion L. Caperton 3114 Boxhill Court Louisville, KY 40222 | None | 12/23/83 | \$500.00 |
| | Occupation Homemaker | 12-23-83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date-\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$9925.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030107

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 A
(Use separate schedules for each
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Summary Page)

| | | | |
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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Frank L. Carney 302 N. Rock Road Wichita, KS 67206 | | Name of Employer Self | Date (month, day, year) 12/27/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen | | Occupation Investments | Amount of Each Receipt This Period \$1000.00 \$1000.00 |
| | | Aggregate Year-to-Date-\$ 2000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Stephen C. Casagrande 2800 Juniper Hill Court Louisville, KY 40206 | | Name of Employer Touche Ross | Date (month, day, year) 9-14-38 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation CPA | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Harold W. Cates 7 Arrowhead Road Louisville, KY 40207 | | Name of Employer Self | Date (month, day, year) 12-23-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Real Estate | Amount of Each Receipt This Period \$800.00 |
| | | Aggregate Year-to-Date-\$ 1800.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Richard Clay 404 Sprite Road Louisville, KY 40207 | | Name of Employer Woodward, Hobson & Fulton | Date (month, day, year) 11-15-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Attorney | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Polly Z. Cochran 25 Stone Bridge Road Louisville, KY 40207 | | Name of Employer None | Date (month, day, year) 12-28-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Retired | Amount of Each Receipt This Period \$300.00 |
| | | Aggregate Year-to-Date-\$ 300.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Terrell Coleman Box 2009 Pikeville, KY 41501 | | Name of Employer Self | Date (month, day, year) 11-22-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Occupation Oil Distributor | Amount of Each Receipt This Period \$1000.00 \$1000.00 |
| | | Aggregate Year-to-Date-\$2000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. George H. Collins 4 Overbrook Road Louisville, KY 40207 | | Name of Employer The Collins Company | Date (month, day, year) 7-18-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation President | Amount of Each Receipt This Period \$250.00 \$250.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$6600.00 |
| TOTAL This Period (last page this line number only) | | | |

94020030108

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 A
(Use separate schedule(s) for each
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Summary Page)

| | | | |
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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Dudley Conner, Sr. 6431 Regency Lane Louisville, KY 40202 | Name of Employer Self | Date (month, day, year) 12-14-83 | Amount of Each Receipt this Period \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Insurance | | |
| | Aggregate Year-to-Date-\$ 250.00 | | |
| B. Full Name, Mailing Address and ZIP Code Dr. Larry N. Cook 2011 Woodford Place Louisville, KY 40205 | Name of Employer Self | Date (month, day, year) 7-6-83 7-6-83 | Amount of Each Receipt This Period \$200.00 \$ 50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary & Gen. | Occupation Doctor | | |
| | Aggregate Year-to-Date-\$550.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mrs. Lucy Dabney Mockingbird Valley Louisville, KY 40207 | Name of Employer None | Date (month, day, year) 12-23-83 | Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Homemaker | | |
| | Aggregate Year-to-Date-\$1000.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Patricia Dabney Mockingbird Valley Louisville, KY 40207 | Name of Employer None | Date (month, day, year) 12-27-83 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Homemaker | | |
| | Aggregate Year-to-Date-\$1000.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mr. Gordon B. Davidson 435 Lightfoot Road Louisville, KY 40207 | Name of Employer Wyatt, Tarrant & Combs | Date (month, day, year) 12-30-83 | Amount of Each Receipt This Period \$230.40 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Attorney | | |
| | Aggregate Year-to-Date-\$230.40 | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Shelby Cullom Davis 70 Pine Street New York, NY 10005 | Name of Employer Shelby Cullom & Davis & Co. | Date (month, day, year) 12-12-83 | Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Investments | | |
| | Aggregate Year-to-Date-\$1000.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Ivan M. Diamond 4604 Deepwood Court Louisville, KY 40202 | Name of Employer Greenebaum, Doll & | Date (month, day, year) 11-23-83 | Amount of Each Receipt This Period \$400.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Attorney | | |
| | Aggregate Year-to-Date-\$ 400.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | \$3,630.40 |
| TOTAL This Period (last page this line number only) | | | |

94020030109

SCHEDULE A

ITEMIZED RECEIPTS

Page 6 of 22 for
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 (Use separate schedule(s) for each
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 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Fritz W. Drybrough, Jr.
 1003 Alta Circle
 Louisville, KY 40205

Name of Employer

Self

Date (month,
day, year)
12-30-83Amount of Each
Receipt This Period
\$500.00

Occupation

Real Estate

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Larry Ethridge
 2402 Longest Avenue
 Louisville, KY 40204

Name of Employer

Self

Date (month,
day, year)
12/30/83Amount of Each
Receipt This Period
\$250.00

Occupation

Attorney

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$300.00

C. Full Name, Mailing Address and ZIP Code

Mr. Lem Evans
 Livermore
 Kentucky 42353

Name of Employer

B. F. Evans Ford

Date (month,
day, year)
9-12-83Amount of Each
Receipt This Period
\$500.00

Occupation

Car Dealer

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Richard Evans
 517 Maple Avenue
 Owensboro, KY 42301

Name of Employer

B. F. Evans Ford

Date (month,
day, year)
9-12-83Amount of Each
Receipt This Period
\$500.00

Occupation

Car Dealer

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Fletcher F. Farrar
 P. O. Box 747
 Mt. Vernon, IL 62864

Name of Employer

Self

Date (month,
day, year)
12-22-83Amount of Each
Receipt This Period
\$1000.00

Occupation

Investments

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$1000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Barbara C. Ferguson
 1006 Doric Circle
 Louisville, KY 40205

Name of Employer

None

Date (month,
day, year)
12-22-83Amount of Each
Receipt This Period
\$1000.00

Occupation

Homemaker

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Bruce L. Ferguson
 1006 Doric Circle
 Louisville, KY 40205

Name of Employer

Underwriters Safety
and Claims, Inc.Date (month,
day, year)
12-22-83Amount of Each
Receipt This Period
\$1000.00

Occupation

President

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$1000.00

SUBTOTAL of Receipts This Page (optional)

\$4750.00

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-----------------------------------|-------------------------|------------------------------------|
| Mr. Charles J. Fisher, Sr. Route 2, Box 6307 Prospect, KY 40059 | | Reliance Universal | 12-28-83 | \$350.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Occupation President | 12-28-83 | \$150.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | | |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Michael M. Fleishman 4107 Woodstone Way Louisville, KY 40222 | | Greenebaum Doll & McDonald | 12-30-83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Attorney | | |
| | | Aggregate Year-to-Date-\$ 500.00 | | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Duffy Ford Route 5, Box 328 Richmond, KY 40475 | | Amick & Helm | 12-05-83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation CPA | | |
| | | Aggregate Year-to-Date-\$ 250.00 | | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Daniel P. Garcia 1714 Dundee Way Louisville, KY 40205 | | Self | 9-16-83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Occupation Doctor | 12-15-83 | \$312.50 |
| | | | 9-16-83 | \$62.50 |
| | | Aggregate Year-to-Date-\$ 625.00 | | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Thomas J. Gillespie 3004 Rexford Way Louisville, KY 40205 | | Technical Products | 7-03-83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation President | | |
| | | Aggregate Year-to-Date-\$ 250.00 | | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Ronald G. Goebel 903 Evergreen Road Louisville, KY 40223 | | Humana | 12-01-83 | \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Doctor | | |
| | | Aggregate Year-to-Date-\$ 300.00 | | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Eleanor A. Goldberg 7306 Shadwell Lane Prospect, KY 40059 | | None | 7-28-83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Occupation Homemaker | 12-30-83 | \$1000.00 |
| | | Aggregate Year-to-Date-\$ 2000.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | | \$4225.00 |
| TOTAL This Period (last page this line number only) | | | | |

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SCHEDULE A

ITEMIZED RECEIPTS

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|---|---|-------------------------------------|---|
| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Patrick H. Gorman 4300 Talahi Way Louisville, KY 40207 | Name of Employer Self | Date (month, day, year) 11-15-83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation Realtor | | |
| | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | |
| | | Aggregate Year-to-Date-\$1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. George Greer 1827 Fieldcrest Drive Owensboro, KY 42301 | Name of Employer Greer W H Supply | Date (month, day, year) 12-12-83 | Amount of Each Receipt This Period \$250.00 |
| | Occupation Owner | | |
| | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | |
| | | Aggregate Year-to-Date-\$250.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. W. R. Griffin 106 Skyline Drive London, KY 40741 | Name of Employer | Date (month, day, year) 12-06-83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation | 12-06-83 | |
| | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | |
| | | Aggregate Year-to-Date-\$ 2000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Miles Haman Charleston Apts. #305 Paducah, KY 42001 | Name of Employer None | Date (month, day, year) 8-05-83 | Amount of Each Receipt This Period \$20.00 |
| | Occupation Homemaker | 11-18-83 | |
| | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | |
| | | Aggregate Year-to-Date-\$540.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Floyd T. Hensley, Jr. Route 3 Box 348 Campbellsville, KY 42718 | Name of Employer Taylor County Bank | Date (month, day, year) 12-9-83 | Amount of Each Receipt This Period \$100.00 |
| | Occupation Banker | | |
| | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | |
| | | Aggregate Year-to-Date-\$600.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Henry V. Heuser 2505 Poplar Crest Road Louisville, KY 40207 | Name of Employer Henry Vogt Machine Company | Date (month, day, year) 12-30-83 | Amount of Each Receipt This Period \$500.00 |
| | Occupation President | | |
| | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. William Heyburn, II 4 Woodhill Road Louisville, KY 40207 | Name of Employer Mutual of New York | Date (month, day, year) 12-20-83 | Amount of Each Receipt This Period \$250.00 |
| | Occupation Insurance Underwriter | | |
| | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | |
| | | Aggregate Year-to-Date-\$250.00 | |
| SUBTOTAL of Receipts This Page (optional)..... | | | \$4620.00 |
| TOTAL This Period (last page this line number only)..... | | | |

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SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER 11 A
(Use separate schedule(s) for each category of the Detailed Summary Page)

| | | | |
|---|--|--|---|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. James G. Hobbs Box 752 Pikeville, KY 41501 | | Name of Employer R. H. Hobbs Co. Occupation Merchant | Date (month, day, year) 12-15-83 Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | | Aggregate Year-to-Date-\$500.00 | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Frank B. Hower, Jr. 399-A Mockingbird Valley Louisville, KY 40207 | | Name of Employer None Occupation Homemaker | Date (month, day, year) 12-30-83 Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. David L. Huber 2335 Village Drive Louisville, Ky 40205 | | Name of Employer Jefferson County Government Occupation CEO | Date (month, day, year) 10-03-83 11-11-83 11-11-83 12-16-83 12-29-83 12-06-83 Amount of Each Receipt This Period \$140.00 \$110.00 \$125.00 \$135.00 \$100.00 \$140.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date-\$1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | | Name of Employer Self Occupation Auto Dealer | Date (month, day, year) 12-30-83 Amount of Each Receipt This Period \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$500.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Norman P. Iler 2402 Grey Fox Road Louisville, KY 40205 | | Name of Employer Creasy Co. Occupation Chrmn. of the Board | Date (month, day, year) 12-28-83 Amount of Each Receipt This Period \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Ms. Kate Ireland Wendover Kentucky 41775 | | Name of Employer Frontier Nursing Service Occupation Director | Date (month, day, year) 11-23-83 Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. William P. Jackson 1208 Colonial Drive Lexington, KY 40504 | | Name of Employer Winmare Corp. Occupation Businessman | Date (month, day, year) 12-19-83 Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$3750.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030113

SCHEDULE A

ITEMIZED RECEIPTS

Page 10 of 22 for
LINE NUMBER 11 A
(Use separate schedules for each
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Summary Page)

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|---|-----------------------------------|-------------------------------------|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Baylor Landrum, Jr 3729 Fairway Lane Louisville, KY 40207 | Name of Employer Self | Date (month, day, year) 9-27-83 | Amount of Each Receipt this Period \$250.00 |
| | Occupation Executive | 12-06-83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date--\$1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Harry Klein 3818 Washington Square Louisville, KY 40207 | Name of Employer Self | Date (month, day, year) 12-14-83 | Amount of Each Receipt This Period \$500.00 |
| | Occupation Consultant | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date--\$500.00 | |
| C. Full Name, Mailing Address and ZIP Code Dr. Harold F. Kleinert Route 2 Ckarlestown, IN 4711 | Name of Employer Self | Date (month, day, year) 7-18-83 | Amount of Each Receipt This Period \$250.00 |
| | Occupation Doctor | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date--\$250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Sammie F. Lee 5801 Apache Road Louisville, KY 40207 | Name of Employer Self | Date (month, day, year) 7-08-83 | Amount of Each Receipt This Period \$250.00 |
| | Occupation Engineer | 12-30-83 | \$ 50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date--\$300.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Lawrence Leis 2928 Field Avenue Louisville, KY 40206 | Name of Employer Louis & Henry | Date (month, day, year) 12-05-83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation Architect | 12-05-83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date--\$2000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Robert F. Linton P. O. Box 111 Pikeville, KY 41501 | Name of Employer Self | Date (month, day, year) 11-22-83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation CPA | 11-22-83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | | Aggregate Year-to-Date--\$2000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. William F. Lucas 18 Indian Hills Trail Louisville, KY 40207 | Name of Employer None | Date (month, day, year) 2-30-83 | Amount of Each Receipt This Period \$500.00 |
| | Occupation Retired | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date--\$500.00 | |
| SUBTOTAL of Receipts This Page (optional): | | | \$6050.00 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER 11 A
(Use separate schedules for each category of the Detailed Summary Page)

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Name of Committee (in Full)
McConnell Senate Committee

| | | | |
|---|--|--|---|
| A. Full Name, Mailing Address and ZIP Code Mr. T. D. Lockett, II 425 Lightfoot Road Louisville, KY 40207 | Name of Employer None | Date (month, day, year) 11-22-83 | Amount of Each Receipt This Period \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Retired | | |
| | Aggregate Year-to-Date —\$250.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Samuel S. Mansbach P. O. Box 1179 Ashland, KY 41101 | Name of Employer Self | Date (month, day, year) 11-28-83 | Amount of Each Receipt This Period \$100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Owner | | |
| | Aggregate Year-to-Date —\$ 700.00 | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation | | |
| | Aggregate Year-to-Date —\$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation | | |
| | Aggregate Year-to-Date —\$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation | | |
| | Aggregate Year-to-Date —\$ | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation | | |
| | Aggregate Year-to-Date —\$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation | | |
| | Aggregate Year-to-Date —\$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | \$200.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030115

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 A
(Use separate schedules for each
category of the Detailed
Summary Page)

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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Lenore P. Meyerhoff 3206 Caves Road Owings Mills, Maryland 21117 | | Name of Employer Self Employed | Date (month, day, year) 12/12/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Investments | Amount of Each Receipt this Period \$1000.00 |
| | | Aggregate Year-to-Date-\$1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. W.H. Millard, Jr. 7913 Rose Island Road Prospect, KY 40059 | | Name of Employer Transit Oil Co. | Date (month, day, year) 11/29/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Chairman of Board | Amount of Each Receipt This Period \$100.00 |
| | | Aggregate Year-to-Date-\$ 600.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Herbert E. Miller, Sr. 2013 Newmarket Drive Louisville, KY 40222 | | Name of Employer Falls City Boat Works, Inc. | Date (month, day, year) 12/30/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Sales Dealer | Amount of Each Receipt This Period \$100.00 |
| | | Aggregate Year-to-Date-\$ 300.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Margaret K. Miller 1222 Manitau Avenue Louisville, KY 40215 | | Name of Employer None | Date (month, day, year) 12/30/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Homemaker | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Clinton Morrison 1905 First Bank Place West Minneapolis, MN 55402 | | Name of Employer Self Employed | Date (month, day, year) 12/27/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Investments | Amount of Each Receipt This Period \$1000.00 |
| | | Aggregate Year-to-Date-\$1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Belle Clay Morton 5815 Round Hill Road Louisville, KY 40222 | | Name of Employer | Date (month, day, year) 12/13/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$500.00 | |
| G. Full Name, Mailing Address and ZIP Code Dr. Antoine S. Munther Dowell Road Russell Springs, KY 42642 | | Name of Employer Self Employed | Date (month, day, year) 12/16/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Surgeon | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$3700.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 13 of 22 for
LINE NUMBER 11 A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Susan G. Musson 306 Hillcrest Louisville, KY 40206 | Name of Employer None | Date (month, day, year) 12/30/83 | Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Homemaker | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Frank Newman 750 S. Ocean Blvd., #16S Boca Raton, FL 33432 | Name of Employer Self | Date (month, day, year) 12/14/83 12-14-83 | Amount of Each Receipt This Period \$1000.00 \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General | Occupation Investments | Aggregate Year-to-Date-\$ 2000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. John M. Nichols 700 Blankenbaker Lane Louisville, KY 40207 | Name of Employer Coopers & Lybrand | Date (month, day, year) 12/28/83 12-28-83 | Amount of Each Receipt This Period \$250.00 \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Occupation Accountant | Aggregate Year-to-Date-\$ 1250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Henry D. Ormsby, III 521 Country Lane Louisville, KY 40207 | Name of Employer First National Bank | Date (month, day, year) 11/28/83 | Amount of Each Receipt This Period \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Banker | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Ms. Diane W. Parker 911 St. Georges Road Baltimore, MD 21210 | Name of Employer Self Employed | Date (month, day, year) 12/5/83 | Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Investments | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. S. Tilford Payne, Jr. 2514 Poplar Crest Road Louisville, KY 40207 | Name of Employer Self Employed | Date (month, day, year) 12/28/83 | Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Investments | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Kathleen Peck P.O. Box 130 Russell Springs, KY 42539 | Name of Employer None | Date (month, day, year) 12/30/83 | Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Homemaker | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$5750.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030117

SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER 11 A
(Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| | | | | |
|--|--|------------------------------------|-------------------------|------------------------------------|
| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Mark S. Pitt 217 Cambridge Station Road Louisville, KY 40223 | | Wyatt, Tarrant & Combs | 12/30/83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Attorney | 12/30/83 | \$ 34.62 |
| | | Aggregate Year-to-Date-\$284.62 | | |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Ira B. Potter P.O. Box 190 Lackey, KY 41643 | | Self Employed | 12/16/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Physician | | |
| | | Aggregate Year-to-Date-\$1000.00 | | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Bill N. Ramsey Box 390 Pikeville, KY 41501 | | Self Employed | 11/22/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General | | Occupation Coal Operator | 11-22-83 | \$1000.00 |
| | | Aggregate Year-to-Date-\$ 2,000.00 | | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Mary Sledd Ratterman 188 Crescent Avenue Louisville, KY 40206 | | None | 12/30/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Homemaker | | |
| | | Aggregate Year-to-Date-\$ 1000.00 | | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Douglas A. Reece 304 Bridge Street Manchester, KY 40962 | | Self Employed | 12/27/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Attorney | | |
| | | Aggregate Year-to-Date-\$ 1000.00 | | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Katie Reece 304 Bridge Street Manchester, KY 40962 | | None | 12/27/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Homemaker | | |
| | | Aggregate Year-to-Date-\$1000.00 | | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. K. Thomas Reichard 2425 Cherokee Parkway Louisville, KY 40204 | | Self Employed | 12/30/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Doctor | | |
| | | Aggregate Year-to-Date-\$500.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | | \$6,484.62 |
| TOTAL This Period (last page this line number only) | | | | |

84020030118

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 22 for
 LINE NUMBER 11 A
 (Use separate schedule(s) for each
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Name of Committee (in Full)
 McConnell Senate Committee

| | | | |
|--|--|--|--|
| A. Full Name, Mailing Address and ZIP Code Dr. William E. Reutman 10880 Jimberly Drive Union, KY 41091 | Name of Employer Self Employed | Date (month, day, year) 12/30/83 | Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Doctor | | |
| | Aggregate Year-to-Date —\$ 600.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Warren W. Rosenthal 751 Cottage Grove Lexington, KY 40502 | Name of Employer None | Date (month, day, year) 12/12/83 | Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary & General | Occupation None | 12-12-83 | \$1000.00 |
| | Aggregate Year-to-Date —\$2000.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Robert W. Rounsavall, III 7501 Covered Bridge Road Prospect, KY 40059 | Name of Employer Dixie Warehouse & Cartage Company | Date (month, day, year) 12/30/83 | Amount of Each Receipt This Period \$150.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Executive | | |
| | Aggregate Year-to-Date —\$ 500.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mr. William M. Rue 4512 Springdale Road Louisville, KY 40222 | Name of Employer First National Bank | Date (month, day, year) 12/2/83 | Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Banker | | |
| | Aggregate Year-to-Date —\$1000.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Phyllis Savidge Lakeside, Otter Lake Estates Hanson, KY 42413 | Name of Employer None | Date (month, day, year) 12/9/83 | Amount of Each Receipt This Period \$900.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary & General | Occupation Homemaker | 12-12-83 | \$1000.00 |
| | Aggregate Year-to-Date —\$2000.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Helen L. Scott P.O. Box 7 Henderson, KY 42420 | Name of Employer None | Date (month, day, year) 12/6/83 | Amount of Each Receipt This Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Homemaker | | |
| | Aggregate Year-to-Date —\$1000.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. John L. Shea 617 Hatherleigh Lane Louisville, KY 40222 | Name of Employer Allen M. Reager | Date (month, day, year) 12/30/83 | Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Occupation Insurance | | |
| | Aggregate Year-to-Date —\$500.00 | | |
| SUBTOTAL of Receipts This Page (optional): | | | \$7050.00 |
| TOTAL This Period (last page this line number only): | | | |

84020030119

SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER **11 A**
(Use separate schedule for each category of the Detailed Summary Page)

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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Hugh M. Shwab, Jr. 10 River Hill Road Louisville, KY 40207 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Occupation | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date- \$500.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. James R. Skaggs 817 Colonel Anderson Parkway Louisville, KY 40222 | Name of Employer Omikron Company | Date (month, day, year) 12/19/83 | Amount of Each Receipt This Period \$100.00 |
| | Occupation Vice President | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date- \$300.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Allan B. Solomon 3303 Innes Trace Court Louisville, KY 40222 | Name of Employer Original Great Amer. Chocolate Chip Cookie Company | Date (month, day, year) 12/30/83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation Executive | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date- \$2000.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Rose Sosowsky 1622 Almara Circle Louisville, KY 40205 | Name of Employer None | Date (month, day, year) 12/14/83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation Homemaker | 12-14-83 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Aggregate Year-to-Date- \$2000.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mr. Donald U. Stauble 321 Blankenbaker Lane Louisville, KY 40207 | Name of Employer Stauble Machine & Tool Co., Inc. | Date (month, day, year) 12/6/83 | Amount of Each Receipt This Period \$75.00 |
| | Occupation Chairman & CEO | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date- \$275.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Douglas D. Stegner 1644 Cherokee Road Louisville, KY 40205 | Name of Employer Meidinger, Inc. | Date (month, day, year) 12/6/83 | Amount of Each Receipt This Period \$500.00 |
| | Occupation Consultant | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date- \$500.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Joseph E. Stopher 416 Jarvis Lane Louisville, KY 40207 | Name of Employer Boehl, Stopher, Graves & Deindoeler | Date (month, day, year) 11/18/83 | Amount of Each Receipt This Period \$100.00 |
| | Occupation Attorney | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Aggregate Year-to-Date- \$600.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 4275.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030120

SCHEDULE A

ITEMIZED RECEIPTS

LINE NUMBER 11 A
(Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|--|--|--|
| A. Full Name, Mailing Address and ZIP Code Mr. Henry D. Stratton P.O. Box 851 Pikeville, KY 41501 | Name of Employer Stratton, May & Hays Occupation Attorney | Date (month, day, year) 12/23/83 | Amount of Each Receipt this Period \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Aggregate Year-to-Date—\$ 1000.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Dan J. Sullivan, Jr. 4042 Ormond Road Louisville, KY 40207 | Name of Employer Occupation | Date (month, day, year) 11/28/83 | Amount of Each Receipt This Period \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Aggregate Year-to-Date—\$ 350.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Roger F. Tarter P.O. Box 10 Dunnville, KY 42528 | Name of Employer Occupation Businessman | Date (month, day, year) 12/28/83 | Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Aggregate Year-to-Date—\$ 500.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Jean Taylor 5900 Creighton Hill Road Louisville, KY 40207 | Name of Employer None Occupation Homemaker | Date (month, day, year) 12/6/83 | Amount of Each Receipt This Period \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Aggregate Year-to-Date—\$ 300.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mr. J. C. Truscott GE/Appliance Park, 3-215 Louisville, KY 40225 | Name of Employer General Electric Occupation Businessman | Date (month, day, year) 12/28/83 | Amount of Each Receipt This Period \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Aggregate Year-to-Date—\$ 300.00 | | |
| F. Full Name, Mailing Address and ZIP Code Dr. H. M. Vandiviere 3429 Brookhaven Drive Lexington, KY 40502 | Name of Employer Self Occupation Physician | Date (month, day, year) 12/30/83 | Amount of Each Receipt This Period \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Aggregate Year-to-Date—\$ 300.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Jack Voigt 2 Rio Vista Drive Louisville, KY 40207 | Name of Employer Self Employed Occupation Insurance Agent | Date (month, day, year) 12/1/83 | Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | Aggregate Year-to-Date—\$ 500.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | \$3150.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030121

SCHEDULE A

ITEMIZED RECEIPTS

Page 18 of 22 for
 LINE NUMBER 11 A
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

| | | | |
|---|--|--|---|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Walter P. Walters, Jr. 2112 Lakeside Drive Lexington, KY 40502 | | Name of Employer None | Date (month, day, year) 11/22/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | | Occupation Retired | Amount of Each Receipt This Period \$1000.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Tom M. Weddle Route 5 Liberty, KY 42539 | | Name of Employer | Date (month, day, year) 12/12/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | | Occupation | Amount of Each Receipt This Period \$250.00 |
| | | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Charles L. Weisberg 1400 Willow Avenue, #1901 Louisville, KY 40204 | | Name of Employer Bass & Weisberg Realtors | Date (month, day, year) 12/30/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary & Gen. | | Occupation Realtor | Amount of Each Receipt This Period \$ 37.47 |
| | | Aggregate Year-to-Date-\$837.43 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Y. Peyton Wells 94 Warrior Road Louisville, KY 40207 | | Name of Employer None | Date (month, day, year) 12/16/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | | Occupation Retired | Amount of Each Receipt This Period \$500.00 |
| | | Aggregate Year-to-Date-\$. | |
| E. Full Name, Mailing Address and ZIP Code Mr. Howard Wilkins, Jr. 250 N. Rock Road, Suite 150 Wichita, KS 67206 | | Name of Employer Self Employed | Date (month, day, year) 12/27/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary & Gen. | | Occupation Entrepreneur | Amount of Each Receipt This Period \$1000.00 |
| | | Aggregate Year-to-Date-\$ 2000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Marguerite Williams Old Monticello Road Thomasville, GA 31792 | | Name of Employer Self Employed | Date (month, day, year) 12/5/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | | Occupation Investments | Amount of Each Receipt This Period \$1000.00 |
| | | Aggregate Year-to-Date-\$1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. William B. Wilson 600 N. Marienfeld, Suite 500 Midland, TX 79701 | | Name of Employer Self Employed | Date (month, day, year) 12/5/83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): 1984 Primary | | Occupation Entrepreneur | Amount of Each Receipt This Period \$1000.00 |
| | | Aggregate Year-to-Date-\$1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$6487.47 |
| TOTAL This Period (list page this line number only) | | | |

040200301212

SCHEDULE A

ITEMIZED RECEIPTS

Page 19 of 22 for
 LINE NUMBER 11 A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---|---|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Edward J. Winkler 5100 Brownsboro Road, #113 Louisville, KY 40222 | Name of Employer Furniture Showrooms | Date (month, day, year) 12/14/83 | Amount of Each Receipt This Period \$300.00 |
| | Occupation Businessman | | |
| | Aggregate Year-to-Date —\$ 300.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Robert H. Wood 502 Ridgewood Road Louisville, KY 40207 | Name of Employer None | Date (month, day, year) 12/5/83 | Amount of Each Receipt This Period \$200.00 |
| | Occupation Retired | | |
| | Aggregate Year-to-Date —\$ 400.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Joseph B. Woodlief 331 Zorn Avenue, #5 Louisville, KY 40206 | Name of Employer Glenmore Dist. Company | Date (month, day, year) 11/22/83 | Amount of Each Receipt This Period \$200.00 |
| | Occupation Executive | | |
| | Aggregate Year-to-Date —\$ 500.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| D. Full Name, Mailing Address and ZIP Code Dr. Byron Young 2040 Von List Way Lexington, KY 40502 | Name of Employer Self Employed | Date (month, day, year) 12/6/83 12/19/83 | Amount of Each Receipt This Period \$500.00 \$500.00 |
| | Occupation Doctor | | |
| | Aggregate Year-to-Date —\$ 1000.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| E. Full Name, Mailing Address and ZIP Code Mr. Alfred Shands, III 8909 Hwy 329 Crestwood, KY 40014 | Name of Employer : | Date (month, day, year) 12-09-83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation | | |
| | Aggregate Year-to-Date —\$1000.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| F. Full Name, Mailing Address and ZIP Code Ms. Mary A. Huff 120 Westwind Road Louisville, KY 40207 | Name of Employer None | Date (month, day, year) 12-28-83 | Amount of Each Receipt This Period \$1000.00 |
| | Occupation Homemaker | | |
| | Aggregate Year-to-Date —\$1000.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| G. Full Name, Mailing Address and ZIP Code Ms. Debbie Davis 2011 Key Blvd. Apt. 600 Arlington, VA 22201 | Name of Employer NRSC | Date (month, day, year) 12-27-83 | Amount of Each Receipt This Period \$500.00 |
| | Occupation | | |
| | Aggregate Year-to-Date —\$ 500.00 | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary (inkind) | | | |
| SUBTOTAL of Receipts This Page (optional) (furniture) | | | \$4200.00 |
| TOTAL This Period (last page this line number only) | | | |

84020030123

SCHEDULE A

ITEMIZED RECEIPTS

Page 20 of 22 for
LINE NUMBER 11A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. William H. Harrison P. O. Box 1884 Louisville, KY | | Name of Employer Taylor Drug Stores Occupation CEO | Date (month, day, year) 11-22-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt this Period \$500.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Henry R. Heyburn 3918 Leland Road Louisville, KY 40207 | | Name of Employer Self Occupation Attorney | Date (month, day, year) 12-28-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Marshall M. Royce 34 Stonebridge Road Louisville, Ky 40207 | | Name of Employer NTVL Occupation Insurance Executive | Date (month, day, year) 12-12-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period \$500.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Frank B. Hower, Jr. 399 Mockingbird Valley Drive Louisville, KY 40207 | | Name of Employer Liberty National Bank Occupation President | Date (month, day, year) 12-30-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Ms. Diane F. Royce 34 Stonebridge Road Louisville, Ky 40207 | | Name of Employer None Occupation Homemaker | Date (month, day, year) 12-12-83 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | | Amount of Each Receipt This Period \$250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Robert P. Shecter 3600 Weedside Road Louisville, Ky 40222 | | Name of Employer Medley Distilling Occupation Executive | Date (month, day, year) 12-22-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Nancy B. Rash 545 Barberry Lane Louisville, KY 40206 | | Name of Employer None Occupation Homemaker | Date (month, day, year) 12-30-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period \$1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | \$4750.00 | |
| TOTAL This Period (last page this line number only) | | | |

84020030124

SCHEDULE A

ITEMIZED RECEIPTS

Page 21 of 22 for
LINE NUMBER 11A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|-------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Charles J. Baird 415 2nd Street Pikeville, KY 41501 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Self | 12-50-83 | |
| | Occupation Attorney | | |
| Aggregate Year-to-Date—\$ 300.00 | | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Roger M. Coleman 3110 Box Hill Lane Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | None | 10-3-83 | |
| | Occupation Retired | | |
| Aggregate Year-to-Date—\$ 1000.00 | | | |
| C. Full Name, Mailing Address and ZIP Code Ms. Ethel M. Coleman 3110 Box Hill Lane Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | None | 10-3-83 | |
| | Occupation Homemaker | | |
| Aggregate Year-to-Date—\$ 1000.00 | | | |
| D. Full Name, Mailing Address and ZIP Code Mr. Shelly Frank 10002 Shelbyville Road Louisville, KY 40232 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Chi-Chi's Restaurant | 12-28-83 | |
| | Occupation President | | |
| Aggregate Year-to-Date—\$ | | | |
| E. Full Name, Mailing Address and ZIP Code Mr. James I. Gibson 1836 Yale Drive Louisville, KY 40205 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 12-28-83 | |
| | Occupation Architect | | |
| Aggregate Year-to-Date—\$1000.00 | | | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Karen P. Giles 9 Overbrook Road Louisville, KY 40207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | None | 9-2-83 | |
| | Occupation Homemaker | | |
| Aggregate Year-to-Date—\$1000.00 | | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Sloane Graff, Jr. 3900 Barbour Lane Louisville, Ky 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 12-27-83 | |
| | Occupation | | |
| Aggregate Year-to-Date—\$ 200.00 | | | |
| SUBTOTAL of Receipts This Page (optional) | | | \$4500.00 |
| TOTAL This Period (last page this line number only) | | | |

0402030135

SCHEDULE A

ITEMIZED RECEIPTS

Page 22 of 22 for
LINE NUMBER 11A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Thomas Simons 1400 Willow #2108 Louisville, KY 40204 | | Name of Employer Capitol Holding Co. Occupation CEO | Date (month, day, year) 12-28-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Vertner D. Smith, Jr. 122 Arrowhead Drive Louisville, KY 40207 | | Name of Employer Vertner D. Smith, Company Occupation Owner | Date (month, day, year) 12-12-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Larry J. Steinberg 7500 Adler Way Louisville, KY 40222 | | Name of Employer Touche Ross & Co. Occupation Accountant | Date (month, day, year) 9-14-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Shirley B. Soloman 3303 Innes Trace Court Louisville, KY 40222 | | Name of Employer None Occupation Homemaker | Date (month, day, year) 12-30-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Paul Tafel, Jr. 506 Country Lane Louisville, KY 40207 | | Name of Employer None Occupation Retired | Date (month, day, year) 12-22-83 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 750.00 | |
| F. Full Name, Mailing Address and ZIP Code 1 | | Name of Employer National Republican Occupation | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | \$3250.00 |
| TOTAL This Period (last page this line number only) | | | \$106,247.49 |

84020030126

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11b
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)
McConnell Senate Committee

| | | | |
|--|--|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code</p> <p>National Republican Senatorial Committee 404 C. Street, N.E. Washington, D.C. 20002</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General \$120 <input checked="" type="checkbox"/> Other (specify): 1984 Primary (inkind-postage)</p> | <p>Name of Employer</p> <p>Occupation (inkind)</p> | <p>Date (month, day, year)</p> <p>8-26-83 8-22-83</p> | <p>Amount of Each Receipt this Period</p> <p>\$15,000.00 \$120.00</p> |
| <p>Aggregate Year-to-Date-\$15,120.00</p> | | | |
| <p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary</p> | <p>Name of Employer</p> <p>Occupation</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt This Period</p> |
| <p>Aggregate Year-to-Date-\$</p> | | | |
| <p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary</p> | <p>Name of Employer</p> <p>Occupation</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt This Period</p> |
| <p>Aggregate Year-to-Date-\$</p> | | | |
| <p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary</p> | <p>Name of Employer</p> <p>Occupation</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt This Period</p> |
| <p>Aggregate Year-to-Date-\$</p> | | | |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary</p> | <p>Name of Employer</p> <p>Occupation</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt This Period</p> |
| <p>Aggregate Year-to-Date-\$</p> | | | |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary</p> | <p>Name of Employer</p> <p>Occupation</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt This Period</p> |
| <p>Aggregate Year-to-Date-\$</p> | | | |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary</p> | <p>Name of Employer</p> <p>Occupation</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt This Period</p> |
| <p>Aggregate Year-to-Date-\$</p> | | | |
| <p>SUBTOTAL of Receipts This Page (optional)</p> | | | <p>15,120.00</p> |

94020030127

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11 C
(Use separate schedule for each
category of the Detailed
Summary Page)

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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code LIB P.A.C. Liberty United Bancorp, I P. O. Box 32500 Louisville, KY 40232 | Name of Employer Occupation Political Action Committee Aggregate Year-to-Date-\$ 1500.00 | Date (month, day, year) 12-16-83 | Amount of Each Receipt This Period \$1500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| B. Full Name, Mailing Address and ZIP Code General Electric P.A.C. Fairfield Connecticut 06431 | Name of Employer Occupation Political Action Committee Aggregate Year-to-Date-\$ 1850.00 | Date (month, day, year) 12-7-83 12-23-83 | Amount of Each Receipt This Period \$100.00 \$1250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| C. Full Name, Mailing Address and ZIP Code Republican Majority Fund 227 MA. Ave., N.E. #220 Washington, D.C. 20002 | Name of Employer Occupation Aggregate Year-to-Date-\$ 5000.00 | Date (month, day, year) 11-11-83 | Amount of Each Receipt This Period \$5,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date-\$ | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date-\$ | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date-\$ | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date-\$ | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | | |
| SUBTOTAL of Receipts This Page (optional) | | | \$7,850.00 |
| TOTAL This Period (last page this line number only) | | | |

8402030123

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 15 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
 McConnell Senate Committee

| | | | | |
|---|--|------------------------------------|--|---|
| A. Full Name, Mailing Address and ZIP Code Bank of Louisville 500 West Broadway Louisville, KY 40202 | | Name of Employer Occupation | Date (month, day, year) Monthly, July- December | Amount of Each Receipt this Period 9,625 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on investment | | Aggregate Year-to-Date—\$15,865 | | |
| B. Full Name, Mailing Address and ZIP Code Liberty National Bank 416 West Jefferson Street Louisville, KY 40202 | | Name of Employer Occupation | Date (month, day, year) Monthly, July- December | Amount of Each Receipt This Period 4,820 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on investment | | Aggregate Year-to-Date—\$7,112 | | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | | 14,445 |
| TOTAL This Period (last page this line number only) | | | | 14,445 |

84020030129

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 8 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|---|--|---|
| A. Full Name, Mailing Address and ZIP Code ABC Printing Company 3520 College Drive Jeffersontown, KY 40299 | Purpose of Disbursement Printing | Date (month, day, year) 7-11-83 | Amount of Each Disbursement This Period 1,905.70 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 8- 6-83 10-1-83 | 57.23 138.60 |
| B. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 12-31-83 | Amount of Each Disbursement This Period 232.06 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| C. Full Name, Mailing Address and ZIP Code Ailes Communications, Inc. 456 West 32rd Street New York, NY 10030 | Purpose of Disbursement Media and campaign consulting and production | Date (month, day, year) 7-1-83 | Amount of Each Disbursement This Period 2,000.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 7-28-83 9-2-83 | 2,000.00 2,000.00 |
| D. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 10-1-83 | Amount of Each Disbursement This Period 4,000.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-1-83 10-31-83 | 645.43 4,000.00 |
| E. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 11-23-83 | Amount of Each Disbursement This Period 1,193.55 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-23-83 12-30-83 | 4,000.00 5,800.00 |
| F. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 11-9-83 | Amount of Each Disbursement This Period 33,815.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code American Bell 9300 Shelbyville Road Louisville, KY 40222 | Purpose of Disbursement Equipment and service | Date (month, day, year) 12-31-83 | Amount of Each Disbursement This Period 872.66 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 72.00 |
| H. Full Name, Mailing Address and ZIP Code Susan Ballard Hedden Road Versailles, KY 40383 | Purpose of Disbursement Net Salary | Date (month, day, year) 12-31-83 | Amount of Each Disbursement This Period 434.15 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code William Bardenwerper 408 Wallace Avenue Louisville, KY 40207 | Purpose of Disbursement Reimburse dinner with consultants | Date (month, day, year) 11-26-83 | Amount of Each Disbursement This Period 371.36 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 63,537.74 |
| TOTAL This Period (last page this line number only) | | | |

8402030130

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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| Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Lowell Conley 8611 Juarez Court Louisville, KY | Purpose of Disbursement Reimburse Travel expenses | Date (month, day, year) 11-26-83 | Amount of Each Disbursement This Period 666.83 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202 | Purpose of Disbursement Computer programming and services | Date (month, day, year) 7-11-83 | Amount of Each Disbursement This Period 1,423.52 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 8-6-83 | 2,708.93 |
| | <input type="checkbox"/> Other (specify): | 10-1-83 | 592.17 |
| C. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 10-19-83 | Amount of Each Disbursement This Period 157.27 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | 10-19-83 | 660.86 |
| | <input type="checkbox"/> Other (specify): | 11-22-83 | 1,135.13 |
| D. Full Name, Mailing Address and ZIP Code Dulworth Office Equipment 204 E. Market Street Louisville, KY 40202 | Purpose of Disbursement Office equipment | Date (month, day, year) 7-11-83 | Amount of Each Disbursement This Period 157.50 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| E. Full Name, Mailing Address and ZIP Code Executive Charter Bowman Field Louisville, KY 40205 | Purpose of Disbursement Air travel | Date (month, day, year) 10-1-83 | Amount of Each Disbursement This Period 885.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code Executive Inn 830 Phillips Lane Louisville, KY 40209 | Purpose of Disbursement Room rental and charges | Date (month, day, year) 11-12-83 | Amount of Each Disbursement This Period 75.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 187.30 |
| G. Full Name, Mailing Address and ZIP Code Faversham World Travel 2843 Brownsboro Rd. Louisville, KY 40206 | Purpose of Disbursement Air travel | Date (month, day, year) 8-6-83 | Amount of Each Disbursement This Period 680.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-1-83 | 114.00 |
| H. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 11-23-83 | Amount of Each Disbursement This Period 340.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 449.00 |
| I. Full Name, Mailing Address and ZIP Code Federal Express Corp. Box 727, Dept. A Memphis, Tenn. 38194 | Purpose of Disbursement Shipping charges | Date (month, day, year) 8-6-83 | Amount of Each Disbursement This Period 138.75 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 8-31-83 | 24.00 |
| | <input type="checkbox"/> Other (specify): | 9-13-83 | 24.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 10,419.26 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 3 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------------------|---|
| Continued | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | 10-1-83 | 25.00 |
| | <input type="checkbox"/> Other (specify): | 11-26-83 12-31-83 | 12.50 240.50 |
| B. Full Name, Mailing Address and ZIP Code Internal Revenue Service Memphis, TN 38102 | Purpose of Disbursement Payroll taxes and withholdings | Date (month, day, year) 12-31-83 | Amount of Each Disbursement This Period 933.79 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 23.98 |
| C. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Rd. Louisville, KY 40220 | Purpose of Disbursement Air travel | Date (month, day, year) 10-1-83 | Amount of Each Disbursement This Period 810.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 225.00 |
| D. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc. 332 Capital Avenue Frankfort, KY 40601 | Purpose of Disbursement Clipping Service | Date (month, day, year) 7-11-83 | Amount of Each Disbursement This Period 269.99 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 8-6-83 10-1-83 | 108.73 291.70 |
| E. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 11-23-83 | Amount of Each Disbursement This Period 464.32 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-30-83 | 198.25 |
| F. Full Name, Mailing Address and ZIP Code Kentucky State Treasurer Frankfort, KY 40601 | Purpose of Disbursement Photocopies; withheld taxes | Date (month, day, year) 7-11-83 | Amount of Each Disbursement This Period 79.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 8-6-83 10-1-83 | 5.60 103.40 |
| G. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) 11-26-83 | Amount of Each Disbursement This Period 12.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 123.82 |
| H. Full Name, Mailing Address and ZIP Code R. Kern 4510 Mt. Vernon Road Louisville, KY 40220 | Purpose of Disbursement Air travel | Date (month, day, year) 7-11-83 | Amount of Each Disbursement This Period 56.45 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code Main Travel Agency 730 W. Main Street Louisville, KY 40202 | Purpose of Disbursement Air travel | Date (month, day, year) 11-23-83 | Amount of Each Disbursement This Period 1,074.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 340.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 5,398.03 |
| TOTAL This Period (last page this line number only) | | | |

84020030132

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 8 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code A. M. McConnell, Sr. 12A Sequoyah Drive Shelbyville, KY 40065 | Purpose of Disbursement Reimburse travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12-31-83 | Amount of Each Disbursement This Period 229.97 |
| B. Full Name, Mailing Address and ZIP Code Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | Purpose of Disbursement Luncheons and travel reimbursements Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-26-83 11-26-83 12-31-83 | Amount of Each Disbursement This Period 111.43 54.18 22.63 |
| C. Full Name, Mailing Address and ZIP Code Steve Mobley 7104 Bearcreek, Apt. A-3 Louisville, KY 40207 | Purpose of Disbursement Reimburse for travel, food, printing & office supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 7-1-83 7-8-83 | Amount of Each Disbursement This Period 28.85 202.89 |
| D. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 7-28-83 9-16-83 | Amount of Each Disbursement This Period 171.02 272.47 |
| E. Full Name, Mailing Address and ZIP Code Nanz & Kraft Florists 141 Breckinridge Lane Louisville, KY 40207 | Purpose of Disbursement Flowers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-1-83 11-26-83 | Amount of Each Disbursement This Period 88.76 235.48 |
| F. Full Name, Mailing Address and ZIP Code Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement reimburse travel expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 7-1-83 7-28-83 9-2-83 | Amount of Each Disbursement This Period 65.00 154.00 95.98 |
| G. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 9-12-83 9-28-83 10-19-83 | Amount of Each Disbursement This Period 150.91 368.83 290.95 |
| H. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-26-83 12-2-83 | Amount of Each Disbursement This Period 20.00 210.85 |
| I. Full Name, Mailing Address and ZIP Code Odell, Roper & Assoc., Inc. 7316 Wisconsin Ave., Suite 507 Bethesda, MD 20814 | Purpose of Disbursement Service fee, printing and mailing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-1-83 11-12-83 | Amount of Each Disbursement This Period 346.00 5,644.16 |
| SUBTOTAL of Disbursements This Page (optional) | | | 8,764.36 |
| TOTAL This Period (last page this line number only) | | | |

34020030133

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 5 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-23-83 12-30-83 | 3,347.00 5,623.66 |
| B. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Purpose of Disbursement Office rent | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-30-83 | 1,763.44 |
| C. Full Name, Mailing Address and ZIP Code Sharon Pierce 5609 Oxford Court, #847 Louisville, KY 40291 | Purpose of Disbursement Net salary; reimburse shipping charges | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 8-24-83 11-26-83 | 5.30 299.45 |
| D. Full Name, Mailing Address and ZIP Code Pitney Bowes 1901 Embassy Square Blvd. Louisville, KY 40299 | Purpose of Disbursement Postage meter rental and postage | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-15-83 12-15-83 | 695.94 440.00 |
| E. Full Name, Mailing Address and ZIP Code Ready Electric Co., Inc. 2030 Frankfort Avenue Louisville, KY 40206 | Purpose of Disbursement Leasehold improvements | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-31-83 | 321.00 |
| F. Full Name, Mailing Address and ZIP Code S P Communications P. O. Box 974 Burlingame, CA 94010 | Purpose of Disbursement Long distance charges | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 7-1-83 8-6-83 8-24-83 | 75.41 149.46 105.38 |
| G. Full Name, Mailing Address and ZIP Code Sam Swope Pontiac, Inc. 4311 Shelbyville Road Louisville, KY 40207 | Purpose of Disbursement Auto Rental | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 7-11-83 8-6-83 10-1-83 | 30.00 70.00 300.00 |
| H. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-26-83 12-31-83 | 30.00 30.00 |
| I. Full Name, Mailing Address and ZIP Code Joseph G. Schiff 1708 Clayton Road Louisville, KY 40205 | Purpose of Disbursement Reimburse dinner charges | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 8-25-83 | 56.05 |
| SUBTOTAL of Disbursements This Page (optional) | | | 13,342.09 |
| TOTAL This Period (last page this line number only) | | | |

84020030134

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 6 of 8 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category or the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Michael Shea 4601 Lincoln Road Louisville, KY 40220 | Reimburse travel expenses | 11-12-83 | 651.00 |
| | | 11-26-83 | 119.50 |
| | | 12-31-83 | 36.90 |
| Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code Shivley Newsweek, Inc. 4639 Dixie Highway Shively, KY 40216 | Printing | 7-11-83 | 703.34 |
| | | 11-26-83 | 895.23 |
| | | | |
| Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232 | Long distance charges and local service | 7-1-83 | 7.87 |
| | | 8-6-83 | 111.61 |
| | | 8-29-83 | 177.25 |
| Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code Continued | | 10-12-83 | 92.96 |
| | | 10-31-83 | 91.41 |
| | | 12-7-83 | 4.12 |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code Continued | | 12-31-83 | 254.27 |
| | | | |
| | | | |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburgh, PA 15254 | Long distance charges | 10-19-83 | 331.99 |
| | | 11-22-83 | 171.18 |
| | | | |
| Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code Joan M. Steurer 4222 Brookhaven Avenue Louisville, KY 40220 | Net salary | 11-14-83 | 450.00 |
| | | 11-28-83 | 446.24 |
| | | | |
| Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| H. Full Name, Mailing Address and ZIP Code Continued | | 12-15-83 | 446.24 |
| | | 12-30-83 | 446.24 |
| | | | |
| Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| I. Full Name, Mailing Address and ZIP Code Sullivan Screen Print Co., Inc. 3808 Fitzgerald Road Louisville, KY 40216 | Bumperstrips | 12-7-83 | 2,310.00 |
| | | | |
| | | | |
| Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 7,747.35 |
| TOTAL This Period (last page this line number only) | | | |

94020030135

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 7 of 8 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
|--|--|---|--|
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code V. Lance Tarrance & Assos. 3845 West FM 1960, Suite 400 Houston, TX 77068 | Purpose of Disbursement Surveys & expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 9-2-83 10-1-83 10-19-83 | Amount of Each Disbursement This Period 3,000.00 23,670.00 2,000.00 |
| B. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-23-83 12-31-83 | Amount of Each Disbursement This Period 320.00 270.00 |
| C. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage and postal charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 7-1-83 8-5-83 8-24-83 | Amount of Each Disbursement This Period 100.00 100.00 200.00 |
| D. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 9-8-83 9-14-83 9-28-83 | Amount of Each Disbursement This Period 200.00 163.50 200.00 |
| E. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-28-83 11-4-83 11-7-83 | Amount of Each Disbursement This Period 1,800.00 150.00 200.00 |
| F. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-22-83 11-22-83 11-22-83 | Amount of Each Disbursement This Period 200.00 40.00 75.00 |
| G. Full Name, Mailing Address and ZIP Code Continued | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-30-83 12-9-83 12-15-83 | Amount of Each Disbursement This Period 200.00 200.00 100.00 |
| H. Full Name, Mailing Address and ZIP Code Western Union Telegraph Co. P. O. Box 101250 Atlanta, GA 30392 | Purpose of Disbursement Telegrams Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12-28-83 12-31-83 | Amount of Each Disbursement This Period 278.84 35.86 |
| I. Full Name, Mailing Address and ZIP Code Xerox Corp. 10001 Linn Station Road Louisville, KY 40223 | Purpose of Disbursement Maintenance agreement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-26-83 | Amount of Each Disbursement This Period 764.94 |
| SUBTOTAL of Disbursements This Page (optional) | | | 34,268.14 |
| TOTAL This Period (last page this line number only) | | | |

84020030136

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 8 of 8 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
|--|---|---|---|
| Any information copied from such Reports and Statements may not be told or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Zip Print 424 West Muhammed Ali Blvd. Louisville, KY 40202 | Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-26-83 12-31-83 | Amount of Each Disbursement This Period 442.87 352.80 |
| B. Full Name, Mailing Address and ZIP Code National Republican Senatorial Committee 404 C Street, N.E. Washington, D.C. 20002 | Purpose of Disbursement Contribution-in-kind for printing & postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 8-22-83 | Amount of Each Disbursement This Period 120.00 |
| C. Full Name, Mailing Address and ZIP Code Debbie Davis 2011 Key Blvd., Apt. 600 Arlington, VA 22201 | Purpose of Disbursement Contribution in kind-office furniture Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12-27-83 | Amount of Each Disbursement This Period 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 1,415.67 |
| TOTAL This Period (last page this line number only) | | | 144,892.64 |

84020030137

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1208
 LINE NUMBER
 (Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Vivian Mattingly
 12701 Cedar Creek Rd.
 Louisville, KY 40202

Purpose of Disbursement

Contribution check of 6-30-83 was returned NSF

Disbursement for: ☒ Primary ☐ General
☒ Other (specify): Check NSF

Date (month, day, year)

7-11-83

Amount of Each Disbursement This Period

1,000.00

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month, day, year)

Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,000.00

TOTAL This Period (last page this line number only)

1,000.00

84020030138

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
 LINE NUMBER 20c
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| | | | |
|--|---|---|---|
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code United Kentucky PAC Box 34000 Louisville, KY 40232 | Purpose of Disbursement Refund excessive contributions Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 7-15-83 | Amount of Each Disbursement This Period 3,000 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 3,000 |
| TOTAL This Period (last page this line number only) | | | 3,000 |

84020030139

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
LINE NUMBER 21
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Contribution | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|----------------------------|--|
| Bunning For Governor P. O. Box 23279 Lexington, KY 40523 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-24-83 | 3,000 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 3,000 |
| TOTAL This Period (last page this line number only) | | | 3,000 |

84020030140

SCHEDULE A

**MEMO ONLY
ITEMIZED RECEIPTS**

Page 1 of 1 for
LINE NUMBER ---
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

EXEMPT LEGAL AND ACCOUNTING SERVICES

| | | | |
|---|--|---|--|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Charles R. Simpson III 717 W. Main Street Louisville, KY 40202 | Name of Employer Self | Date (month, day, year) Various- July- December | Amount of Each Receipt this Period 500 |
| | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Exempt legal services | Aggregate Year-to-Date—\$ | | |
| B. Full Name, Mailing Address and ZIP Code Larry J. Steinberg 7500 Adler Way Louisville, KY 40222 | Name of Employer Touche Ross & Co. | Date (month, day, year) Various- July- December | Amount of Each Receipt This Period 1,275 |
| | Occupation CPA | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Exempt accounting services | Aggregate Year-to-Date—\$ | | |
| C. Full Name, Mailing Address and ZIP Code Robert E. Whiting 200 Old Bond Court, #5 Louisville, KY 40222 | Name of Employer Touche Ross & Co. | Date (month, day, year) Various- July- December | Amount of Each Receipt This Period 550 |
| | Occupation Consultant | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Exempt accounting services | Aggregate Year-to-Date—\$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2,325 |
| TOTAL This Period (last page this line number only) | | | 2,325 |

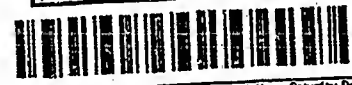
84020030141



PLEASE COMPLETE ALL INFORMATION IN THE 5 BLOCKS OUTLINED IN ORANGE
SEE BACK OF FORM SET FOR COMPLETE PREPARATION INSTRUCTIONS.

AIRBILL NUMBER

408587966



YOUR FEDERAL EXPRESS ACCOUNT NUMBER
0437-0425-1

DATE
1/31/84

If Hold For Pick-Up or Saturday Delivery,
Recipient's Phone Number

FROM (Your Name)
Larry Steinberg
COMPANY
DOCKE RUBEN & CO.
STREET ADDRESS
510 S. BROADWAY
CITY
LOUISVILLE STATE
KY

TO (Recipient's Name)
Secretary of the Senate
COMPANY
Office of Public Records
STREET ADDRESS (P.O. BOX NUMBERS ARE NOT DELIVERABLE)
119 D Street, N.E.
CITY
Washington STATE
D.C.

AIRBILL NO. **408587966**

ZIP ADDRESS ZIP CODE REQUIRED
FOR CORRECT ADDRESS

IN TENDERING THIS SHIPMENT, SHIPPER AGREES THAT
F.E.C. SHALL NOT BE LIABLE FOR SPECIAL, INCIDENTAL
OR CONSEQUENTIAL DAMAGES ARISING FROM

ZIP ADDRESS ZIP CODE REQUIRED
FOR OVERNIGHT DELIVERY
20510

YOUR NOTES/REFERENCE NUMBERS (FIRST 12 CHARACTERS WILL ALSO APPEAR ON INVOICE)

PAYMENT ☒ Bill Shipper ☐ Bill Recipient's F.E.C. Acct. ☐ Bill 3rd Party F.E.C. Acct. ☐ Bill Credit Card
☐ Cash In Advance Account Number/Credit Card Number

| SERVICES CHECK ONLY ONE BOX | | DELIVERY AND SPECIAL HANDLING CHECK SERVICES REQUIRED |
|--|--|--|
| PRIORITY 1 <input checked="" type="checkbox"/> OVERNIGHT PACKAGES (40 to 70 LBS.) COURIER PAK <input type="checkbox"/> OVERNIGHT ENVELOPE (40 to 70 LBS.) <input type="checkbox"/> OVERNIGHT BOX (40 to 70 LBS.) <input type="checkbox"/> OVERNIGHT TUBE (40 to 70 LBS.) STANDARD AIR <input type="checkbox"/> DELIVERY AND BUSINESS DAY FOLLOWING PICK UP (40 to 70 LBS.) | OVERNIGHT LETTER <input type="checkbox"/> 6 (40 to 70 LBS.) <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 "OVERNIGHT" IS NEXT BUSINESS DAY (MONDAY THROUGH FRIDAY); TWO DAYS FROM ALASKA/HAWAII. SATURDAY DELIVERY AVAILABLE IN CONTINENTAL U.S. SEE "SPECIAL HANDLING." | <input type="checkbox"/> HOLD FOR PICK-UP AT FOLLOWING FEDERAL EXPRESS LOCATION SHOWN IN SERVICE GUIDE. RECIPIENT'S PHONE NUMBER REQUIRED. 2 <input checked="" type="checkbox"/> EXCESS 3 <input type="checkbox"/> SECURITY SERVICE REQUIRED (See Remarks: Extra charge applies for delivery.) 4 <input type="checkbox"/> RESTRICTED ARTICLES SERVICE (RAS) (Standard Air Packages only, extra charge) 5 <input type="checkbox"/> CCC (Customer Service Center) (Standard Air Packages only, extra charge) 6 <input type="checkbox"/> DAY AFTER 7 <input type="checkbox"/> OTHER SPECIAL SERVICE 8 <input type="checkbox"/> 9 <input type="checkbox"/> |

| PACKAGES | WEIGHT | DECLARED VALUE | CS |
|----------|--------|-------------------|----|
| 1 | 1 | 1 | |
| 2 | 2 | 2 | |
| 3 | 3 | 3 | |
| 4 | 4 | 4 | |
| 5 | 5 | 5 | |
| 6 | 6 | 6 | |
| 7 | 7 | 7 | |
| 8 | 8 | 8 | |
| 9 | 9 | 9 | |
| TOTAL | TOTAL | TOTAL | |

RECEIVED AT
SHIPPER'S DOOR
☐ REGULAR STOP
☐ ON-CALL STOP
☐ F.E.C. LOC.
Federal Express Corporation Employee No. _____
DATE/TIME For Federal Express Use _____

CARRIAGE HEREOF, F.E.C. DIS-
CLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, WITH
RESPECT TO THIS SHIPMENT. THIS IS A NON-NEGOTIABLE
AIRBILL SUBJECT TO CONDITIONS OF CONTRACT SET FORTH
ON REVERSE OF SHIPPER'S COPY. UNLESS YOU DECLARE A
HIGHER VALUE, THE LIABILITY OF FEDERAL EXPRESS COR-
PORATION IS LIMITED TO \$100.00. FEDERAL EXPRESS DOES
NOT CARRY CARBO LIABILITY INSURANCE.

| EMP. NO. | DATE |
|----------|------|
| | |

☐ CASH RECEIVED
☐ RETURN SHIPMENT
☐ THIRD PARTY
☐ DEC. TO REL. ☐ DEC. TO HOLD

STREET ADDRESS
CITY
STATE
ZIP

RECEIVED BY: (Signature)
X
DATE/TIME RECEIVED
F.E.C. EMPLOYEE NUMBER

| FEDERAL EXPRESS USE | |
|-----------------------|--|
| FREIGHT CHARGES | |
| DECLARED VALUE CHARGE | |
| ADVANCE ORIGIN | |
| ADVANCE DESTINATION | |
| OTHER | |
| TOTAL CHARGES | |

PART
#2041730751
FEC-S-0751 D/O/B
REVISION DATE
7/82 NCR
PRINTED U.S.A.

RECIPIENT COPY (AFFIXED TO PACKAGE, GIVEN TO RECIPIENT AT DELIVERY)

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

119 D STREET, N.E.
ROOM A-623
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: _____

CERTIFIED

REGISTERED

X FEDERAL EXPRESS 1-31-84

EXPRESS MAIL

84020030143

**DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)**

Name of Committee (in Full)

McConnell Senate Committee

Report Covering the Period:

From: January 31, 1983 June 30, 1983

I. RECEIPTS

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees
(Memo Entry Unitemized \$ 24,481)

(b) Political Party Committees

(c) Other Political Committees

(d) The Candidate

(e) TOTAL CONTRIBUTIONS (other than loans) (add 11a, 11b, 11c and 11d)

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the Candidate

(b) All Other Loans

(c) TOTAL LOANS (add 13a and 13b)

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

15. OTHER RECEIPTS (Dividends, Interest, etc.)

16. TOTAL RECEIPTS (Add 11e, 12, 13c, 14 and 15)

II. DISBURSEMENTS

17. OPERATING EXPENDITURES

18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed by the Candidate

(b) Of All Other Loans

(c) TOTAL LOAN REPAYMENTS (add 19a and 19b)

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

(b) Political Party Committees

(c) Other Political Committees

(d) TOTAL CONTRIBUTION REFUNDS (add 20a, 20b and 20c)

21. OTHER DISBURSEMENTS

22. TOTAL DISBURSEMENTS (Add 17, 18, 19c, 20d and 21)

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD \$ 212,586

24. TOTAL RECEIPTS THIS PERIOD (From Line 16) \$ 201,335

25. SUBTOTAL (Add Line 23 and Line 24) \$ 413,921

26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) \$ 38,589

27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) \$ 375,332

93020051534

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|-------------------------------------|--|------------------------------------|
| Donald T. Johnson 3800 Bryan Station Pk. Lexington, KY 40511 | Crescent Farms | 1/5/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Farmer | Aggregate Year-to-Date-\$1,000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Robert R. Goodin 3012 Lighthouse Road Louisville, KY 40222 | Self | 1/6/83 | \$400.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date-\$400.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Stephen Goodman 2406 Merrick Road Louisville, KY 40207 | Byck Bros. & Co. | 1/6/83 | \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Retail | Aggregate Year-to-Date-\$300.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Morton Kasdan 600 Col. Anderson Pkwy. Louisville, KY 40222 | Morton L. Kasdan, M.D., F.A.C.S. | 1/6/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date-\$1,000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Christina L. Brown 6501 Longview Lane Louisville, KY 40222 | | 1/10/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation | Aggregate Year-to-Date-\$1,000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Drura Scott Box 7 Henderson, KY 42420 | Scott Lumber | 1/10/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Owner | Aggregate Year-to-Date-\$1,000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| W.H. Smock Box 173, Riverwood Drive Murray, KY 42071 | H. T. Marketing | 1/10/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation | 1/10/83 Aggregate Year-to-Date-\$2,000.00 | \$1,000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | \$6,700.00 |
| TOTAL This Period (last page this line number only) | | | |

93020051535

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 32 for
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 (Use separate schedule(s) for each
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 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Randall A. Waller
 Route 7, Sherwood Forest
 King Richard Drive
 Murray, KY 42071

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

1/10/83
1/10/83\$1,000.00
\$1,000.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 2,000.00

B. Full Name, Mailing Address and ZIP Code

James S. Williams
 823 Main
 Sturgis, KY 42459

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

1/10/83

\$500.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

K.T. Reichard
 600 Sunset Road
 Louisville, KY 40206

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Self

1/13/83

\$300.00

Occupation

Doctor

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 300.00

D. Full Name, Mailing Address and ZIP Code

Edward N. McDevitt
 105 Chipping Way
 Louisville, KY 40222

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Jefferson Co. Works

1/17/83

\$300.00

Occupation

Government Employee

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 300.00

E. Full Name, Mailing Address and ZIP Code

C.W. Stoll
 Mockingbird Valley Road
 Louisville, KY 40207

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

Retired

1/17/83

\$500.00

Receipt For: ☒ Primary ☐ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

F. Full Name, Mailing Address and ZIP Code

J.H. Thornton
 Route 4, Iron Works Road
 Georgetown, KY 40324

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Thornton Oil Corp.

1/17/83

\$1,000.00

Occupation

Chairman of Board

1/17/83

\$1,000.00

Receipt For: ☒ Primary ☒ General
☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 2,000.00

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

\$5,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 32 for
LINE NUMBER 11A
(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Steve A. Bass
1012 S. 4th Street
Louisville, KY 40203

Name of Employer

Bass Advertising

Date (month,
day, year)

1/25/83

Amount of Each
Receipt this Period

\$1,000.00

Occupation

President

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

F.T. Hensley, Jr.
Route 3, Box 348
Campbellsville, KY 42718

Name of Employer

Taylor County Bank

Date (month,
day, year)

1/30/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Banker

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Joe A. Young
c/o Joe A. Young Realty
Louisia, KY 41239

Name of Employer

Self

Date (month,
day, year)

2/03/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Real Estate

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Ann Ferriell
1901 Arboro Place
Louisville, KY 40220

Name of Employer

Atherton High School

Date (month,
day, year)

2/8/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Teacher

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$500.00

E. Full Name, Mailing Address and ZIP Code

Samuel S. Mansbach
c/o Mansbach Metal
1900 Front Street
Ashland, KY 41101

Name of Employer

Mansbach Metal

Date (month,
day, year)

1/10/83

Amount of Each
Receipt This Period

\$100.00

Occupation

Principal

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 600.00

F. Full Name, Mailing Address and ZIP Code

Leonard W. Arentson
c/o Batus
2000 Citizens Plaza
Louisville, KY 40202

Name of Employer

Batus

Date (month,
day, year)

2/16/83

Amount of Each
Receipt This Period

\$500.00

Occupation

V Pres/Controller

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Michael R. Dowling
1620 Montgomery
Ashland, KY 41101

Name of Employer

Self

Date (month,
day, year)

2/21/83

Amount of Each
Receipt This Period

\$250.00

Occupation

Attorney

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional)

\$3,850.00

TOTAL This Period (last page this line number only)

93020051537

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mike Malone
 Box 562
 Grayson, KY 41143

Name of Employer

Malone Funeral Home

Date (month,
day, year)

2/21/83

Amount of Each
Receipt this Period

\$250.00

Occupation

Funeral Director

Aggregate Year-to-Date—\$ 250.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

B. Full Name, Mailing Address and ZIP Code

Elwood Parker
 Burning Fork Road, Box 212
 Pikeville, KY 41051

Name of Employer

Parker Mining

Date (month,
day, year)

2/21/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Coalminer

Aggregate Year-to-Date—\$1,000.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

C. Full Name, Mailing Address and ZIP Code

Gail Knopf
 610 Jarvis Lane
 Louisville, KY 40207

Name of Employer

Date (month,
day, year)

2/24/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Housewife

Aggregate Year-to-Date—\$ 2,000.00

Receipt For: ☒ Primary ☒ General☒ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

Daniel P. Knopf, Jr.
 610 Jarvis Lane
 Louisville, KY 40207

Name of Employer

Coopers & Lybrand
CPA'sDate (month,
day, year)

2/24/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Accountant

Aggregate Year-to-Date—\$ 2,000.00

Receipt For: ☒ Primary ☒ General☒ Other (specify): 1984 Primary

E. Full Name, Mailing Address and ZIP Code

John H. Ward, III
 610 Club Lane
 Louisville, KY 40207

Name of Employer

Aetna Life & Casualty

Date (month,
day, year)

2/24/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Insurance

Aggregate Year-to-Date—\$ 500.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

F. Full Name, Mailing Address and ZIP Code

Robert J. Kaiser
 4001 Dutchmans Lane, Suite 4-E
 Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

2/25/83

Amount of Each
Receipt This Period

\$250.00

Occupation

Doctor

Aggregate Year-to-Date—\$ 250.00

Receipt For: ☒ Primary ☐ General☒ Other (specify): 1984 Primary

G. Full Name, Mailing Address and ZIP Code

Charles R. Savidge
 Lakeside, Otter Lake Estates
 Hanson, KY 42431

Name of Employer

So. Hopkins Coal Co.

Date (month,
day, year)

2/25/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Coal Mine Operator

Aggregate Year-to-Date—\$ 2,000.00

Receipt For: ☒ Primary ☒ General☒ Other (specify): 1984 Primary

SUBTOTAL of Receipts This Page (optional)

\$8,000.00

TOTAL This Period (last page this line number only)

03020051530

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-------------------------------------|------------------------------------|------------------------------------|
| Richard P. Mayer 8011 Wolf Pen Branch Rd. Prospect, KY 40059 | Ky. Fried Chicken | 3/1/83 | \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Chief Executive Off | Aggregate Year-to-Date-\$ 300.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Charles R. Coy 212 N. 2nd Street Richmond, KY 40475 | Self | 3/2/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Attorney | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Betty C. Bivin 1055 Stone Spring Way Louisville, KY 40223 | | 3/3/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Executive Secretary | Aggregate Year-to-Date-\$ 1,000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ralph Drees 211 Grandview Ft. Mitchell, KY 41017 | Self | 3/8/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Builder | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Donald H. Putnam, Jr. P.O. Box 991 Ashland, KY 41101 | Putnam Agency | 3/8/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Broker | Aggregate Year-to-Date-\$ 1,000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Jerry B. Buchanan, M.D. 5615 Wolf Pen Trace Prospect, KY 40059 | Methodist Hospital | 3/9/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| E.D. Duane 721 Watterson Trail Middletown, KY 40243 | The Duane Co. | 3/10/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation president Real Estate | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$4,300.00 |
| TOTAL This Period (last page this line number only) | | | |

93020051539

SCHEDULE A

ITEMIZED RECEIPTS

Page 6 of 32 for
LINE NUMBER 11A
(Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

John P. Locke
2200 N. Rose Island Road
Prospect, KY 40059

Name of Employer

Topco Marketing

Date (month,
day, year)

2/10/83

Amount of Each
Receipt this Period

\$500.00

Occupation

Insurance

3/11/83

\$500.00

3/11/83

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 2,000.00

B. Full Name, Mailing Address and ZIP Code

William W. Thomason, Jr.
1231 Kastle Road
Lexington, KY 40513

Name of Employer

Mill Ridge Farm, Ltd

Date (month,
day, year)

3/14/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Controller/CPA

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

Cy Waddle
708 Jarvis Avenue
Somerset, KY 42501

Name of Employer

Somerset Refining

Date (month,
day, year)

3/14/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

President/Manager

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

D. Full Name, Mailing Address and ZIP Code

Ben A. Reid, Jr.
98 Warrior Road
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

3/15/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Doctor

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Norman M. Cole
3609 Glenview Avenue
Glenview, KY 40025

Name of Employer

Self

Date (month,
day, year)

3/17/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Doctor

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Frank B. Hower, Jr.
399-A Mockingbird Valley
Louisville, KY 40207

Name of Employer

Liberty National Bank

Date (month,
day, year)

3/21/83

Amount of Each
Receipt This Period

\$500.00

Occupation

President

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

David S. Nightingale
401 Jarvis Lane
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

3/25/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Doctor

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

SUBTOTAL of Receipts This Page (optional)

\$6,500.00

TOTAL This Period (last page this line number only)

03020051540

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11A
(Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Robert P. Schecter
3600 Woodside Road
Louisville, KY 40222

Name of Employer

Medley Distilling
Company

Date (month,
day, year)

3/28/83

Amount of Each
Receipt this Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Vice Chairman

Aggregate Year-to-Date-\$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

Rucker Todd
6 Woodhill Road
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

3/28/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Attorney

Aggregate Year-to-Date-\$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

Michael Chambers
P.O. Box 3908
Evansville, IN 47737

Name of Employer

General Oilfield
Supply

Date (month,
day, year)

3/30/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 1,000.00

D. Full Name, Mailing Address and ZIP Code

Ray C. Dauenhauer, Jr.
1519 Sylvan Way
Louisville, KY 40205

Name of Employer

Daunhauer Plumbing

Date (month,
day, year)

3/31/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Contractor

Aggregate Year-to-Date-\$ 1,000.00

E. Full Name, Mailing Address and ZIP Code

J.B. Robinson
Philip Morris U.S.A.
120 Park Avenue
New York, NY 10017

Name of Employer

Philip Morris

Date (month,
day, year)

4/4/83

Amount of Each
Receipt This Period

\$250.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Dir. of Public Affairs

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Gerald Mansbach
P.O. Box 41101
Ashland, KY 41101

Name of Employer

Mansbach Metal

Date (month,
day, year)

4/7/83

Amount of Each
Receipt This Period

\$500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Principal

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

William F. Miles
Route 2, Box 133
Anchorage, KY 40223

Name of Employer

Process Machinery,
Inc.

Date (month,
day, year)

4/7/83

Amount of Each
Receipt This Period

\$500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Occupation

Chairman of Board

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

\$5,250.00

TOTAL This Period (last page this line number only)

93020051541

SCHEDULE A

ITEMIZED RECEIPTS

Page 8 of 32 for
LINE NUMBER 11A
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

William Hoskins
2029 Lakeshore
Lexington, KY 40502

Name of Employer

Lexington Building
Supply

Date (month,
day, year)

4/8/83

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Occupation

Owner-Self Employed

Aggregate Year-to-Date-\$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

L.A. Caperton
8202 Wolf Pen Branch Road
Prospect, KY 40059

Name of Employer

Self

Date (month,
day, year)

3/21/83
4/18/83

Amount of Each
Receipt This Period

\$250.00
\$250.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Occupation

Investor

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

C.R. Morrison
504 Rolling Lane
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

4/18/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Occupation

Doctor

Aggregate Year-to-Date-\$ 1,000.00

D. Full Name, Mailing Address and ZIP Code

James C. Grundy, Jr.
Star Route
Lebanon, KY 40033

Name of Employer

Self

Date (month,
day, year)

4/26/83

Amount of Each
Receipt This Period

\$250.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Occupation

Farmer

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Anne Hoke
1114 County Cork Drive
Murray, KY 42071

Name of Employer

Date (month,
day, year)

4/28/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Occupation

Homemaker

Aggregate Year-to-Date-\$ 1,000.00

F. Full Name, Mailing Address and ZIP Code

Charles Hoke
1114 County Cork Drive
Murray, KY 42071

Name of Employer

Hoke Mining

Date (month,
day, year)

4/28/83

Amount of Each
Receipt This Period

\$1,000.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 primary

Occupation

President

Aggregate Year-to-Date-\$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

C.I. Mahon
3721 Fairway Lane
Louisville, KY 40207

Name of Employer

Captains Quarters

Date (month,
day, year)

4/28/83

Amount of Each
Receipt This Period

\$500.00

Receipt For:

☒ Primary

☐ General

☒ Other (specify): 1984 Primary

Occupation

Restauranteer

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional).....

\$5,250.00

TOTAL This Period (last page this line number only)

93020051542

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Y.P. Wells
94 Warrior Road
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

4/28/83

\$500.00

Occupation

Retired

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Darrell Wells
4898 Brownsboro Center
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

4/28/83

\$500.00

Occupation

Security Analyst

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Helen E. Abell
Mockingbird Valley Road
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/3/83

\$1,000.00

Occupation

Housewife
 Aggregate Year-to-Date—\$ 1,000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

D. Full Name, Mailing Address and ZIP Code

George H. Collins
4 Overbrook Road
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

4/15/83

\$250.00

5/4/83

\$250.00

Occupation

President

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Larry N. Cook, M.D.
2011 Woodford Place
Louisville, KY 40205

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/4/83

\$300.00

Occupation

Doctor

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 300.00

F. Full Name, Mailing Address and ZIP Code

Henning Hilliard
4506 Upper River Road
Louisville, KY 40222

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/4/83

\$500.00

Occupation

Stock Broker

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Lillie F. Webb
Xalapa Farm
Route 4, Box 122
Paris, KY 40301

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

5/4/83

\$1,000.00

5/4/83

\$1,000.00

Occupation

Horsebreeder

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date—\$ 2,000.00

SUBTOTAL of Receipts This Page (optional)

\$5,300.00

TOTAL This Period (last page this line number only)

3020051543

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11A
(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

John R. Brooking
421 Garrard Street
Covington, KY 41011

Name of Employer

Self

Date (month,
day, year)
5/10/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Attorney

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

George H. Warren, Jr.
1247 Laurel Drive
Owensboro, KY 42301

Name of Employer

Zogg Oil Company

Date (month,
day, year)
5/11/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Oil & Gas Developer

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Milton S. Yunker
P.O. Box 1983
Owensboro, KY 42301

Name of Employer

Zogg Oil Company

Date (month,
day, year)
5/11/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Oil & Gas Developer

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Charles J. Fisher, Sr.
Route 2, Box 6307
Prospect, KY 40059

Name of Employer

Reliance Universal

Date (month,
day, year)
5/12/83

Amount of Each
Receipt This Period
\$500.00

Occupation

President & CEO

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Margaret S. Duane
721 Watterson Trail
Middletown, KY 40243

Name of Employer

Date (month,
day, year)
5/16/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Homemaker

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

David L. Daugherty
1600 Gardiner Lane, #118
Louisville, KY 40205

Name of Employer

Self-Daugherty,
Trautwein, & H

Date (month,
day, year)
5/17/83

Amount of Each
Receipt This Period
\$250.00

Occupation

Professional Engineer

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Becky Locke
2200 N. Rose Island Road
Prospect, KY 40059

Name of Employer

Date (month,
day, year)
5/17/83
5/17/83

Amount of Each
Receipt This Period
\$1,000.00
\$1,000.00

Occupation

Homemaker

Receipt For: ☒ Primary ☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date-\$ 2,000.00

SUBTOTAL of Receipts This Page (optional)

\$4,750.00

TOTAL This Period (last page this line number only)

93020051544

SCHEDULE A

ITEMIZED RECEIPTS

Page 11 of 32 for
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(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|---|---|---|
| A. Full Name, Mailing Address and ZIP Code Shirley W. Palmer-Ball Box 7155 Louisville, KY 40207 | Name of Employer Palmer Products | Date (month, day, year) 5/17/83 | Amount of Each Receipt this Period \$400.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation President | Aggregate Year-to-Date—\$ 400.00 | |
| B. Full Name, Mailing Address and ZIP Code Robert T. Trautwein 7814 Pine Ridge Road Louisville, KY 40222 | Name of Employer Self-Daugherty, Trautwein & H | Date (month, day, year) 5/17/83 | Amount of Each Receipt This Period \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Professional Engineer | Aggregate Year-to-Date—\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Henry R. Heyburn 3918 Leland Road Louisville, KY 40207 | Name of Employer Self | Date (month, day, year) 5/20/83 | Amount of Each Receipt This Period \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Attorney | Aggregate Year-to-Date—\$ 1,000.00 | |
| D. Full Name, Mailing Address and ZIP Code Edwin L. Goldberg Paper Products, Inc. 129 N. Randolph Clarksville, IN 47130 | Name of Employer Paper Products, Inc | Date (month, day, year) 5/27/83 | Amount of Each Receipt This Period \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation President | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code George N. King, Sr. 7105 Fox Harbor Road Prospect, KY 40059 | Name of Employer Mr. Klean | Date (month, day, year) 5/27/83 | Amount of Each Receipt This Period \$700.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation President | Aggregate Year-to-Date—\$ 700.00 | |
| F. Full Name, Mailing Address and ZIP Code Robert M. Timmerman 2009 Camargo Road Louisville, KY 40207 | Name of Employer Riverport Authority | Date (month, day, year) 5/27/83 | Amount of Each Receipt This Period \$700.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Secretary/Treasurer | Aggregate Year-to-Date—\$ 700.00 | |
| G. Full Name, Mailing Address and ZIP Code Ardell S. Young 4511 Greenwood Avenue Louisville, KY 40211 | Name of Employer Mr. Klean | Date (month, day, year) 5/27/83 | Amount of Each Receipt This Period \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Vice President | Aggregate Year-to-Date—\$ 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$3,600.00 |
| TOTAL This Period (last page this line number only) | | | |

A 3020051545

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Charles R. Simpson, III
3906 Elfin Avenue
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

6/2/83

Amount of Each
Receipt this Period
\$500.00

Occupation

Attorney

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Jesse C. Bollinger, Jr.
4000 Glenview Avenue
Glenview, KY 40025

Name of Employer

Self

Date (month,
day, year)

6/6/83

Amount of Each
Receipt This Period
\$1,000.00
\$1,000.00

Occupation

Builder

Receipt For: ☒ Primary ☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date-\$ 2,000.00

C. Full Name, Mailing Address and ZIP Code

Norton R. Cohen
4800 Springdale Road
Louisville, KY 40222

Name of Employer

Date (month,
day, year)

6/10/83

Amount of Each
Receipt This Period
\$1,000.00

Occupation

Retired

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

D. Full Name, Mailing Address and ZIP Code

Jan S. Karzen
515 Country Lane
Louisville, KY 40207

Name of Employer

Paul Semonin Co.

Date (month,
day, year)

6/13/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Real Estate

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Charles C. Smith
2109 Starmont Road
Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

6/14/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Doctor

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Robert H. Kamman
2313 Clarkwood Road
Louisville, KY 40207

Name of Employer

Date (month,
day, year)

6/15/83

Amount of Each
Receipt This Period
\$500.00

Occupation

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Jeannette Priebe
2007 Goshen Lane
Prospect, KY 40059

Name of Employer

Jefferson County
Government

Date (month,
day, year)

6/15/83

Amount of Each
Receipt This Period
\$200.00
\$50.00

Occupation

Personnel Director

Receipt For: ☒ Primary ☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional)

\$5,250.00

TOTAL This Period (last page this line number only)

83020051546

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Carl J. Zoeller
 9011 Whipps Mill Rd.
 Louisville, Ky. 40222

Name of Employer

Masters Supplies

Date (month,
day, year)

6/15/83

Amount of Each
Receipt this Period

500.00

Receipt For:

☒ Primary☐ General☒ Other (specify): 1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

David L. Huber
 2335 Village Drive
 Louisville, Ky. 40205

Name of Employer

Jefferson Co. Govt.

Date (month,
day, year)

6/16/83

Amount of Each
Receipt This Period

250.00

Receipt For:

☒ Primary☐ General☒ Other (specify): 1984 Primary

Occupation

C.E.O.

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Baylor Landrum, Jr.
 3729 Fairway Lane
 Louisville, Ky. 40207

Name of Employer

NT&L

Date (month,
day, year)

3/18/83

Amount of Each
Receipt This Period

250.00

Receipt For:

☒ Primary☐ General☒ Other (specify): 1984 Primary

Occupation

Insurance Exec.

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Joan Bryan
 3821 Manner Dale Drive
 Louisville, Ky. 40220

Name of Employer

Jefferson County

Date (month,
day, year)

1/7/83

Amount of Each
Receipt This Period

200.00

Receipt For:

☒ Primary☐ General☒ Other (specify): 1984 Primary

Occupation

Program Worker

Aggregate Year-to-Date-\$ 300.00

E. Full Name, Mailing Address and ZIP Code

Karen P. Giles
 9 Overbrook Road
 Louisville, Ky. 40207

Name of Employer

Date (month,
day, year)

6/17/83

Amount of Each
Receipt This Period

1,000.00

Receipt For:

☒ Primary☐ General☒ Other (specify): 1984 Primary

Occupation

Aggregate Year-to-Date-\$ 1,000.00

F. Full Name, Mailing Address and ZIP Code

Vertner D. Smith, Jr.
 122 Arrowhead Road
 Louisville, Ky. 40207

Name of Employer

The Vertner Smith Co.

Date (month,
day, year)

6/17/83

Amount of Each
Receipt This Period

500.00

Receipt For:

☒ Primary☐ General☒ Other (specify): 1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

H. L. Duerson
 400 Pleasantview Avenue
 Louisville, Ky. 40206

Name of Employer

Southern Optical

Date (month,
day, year)

6/20/83

Amount of Each
Receipt This Period

500.00

Receipt For:

☒ Primary☐ General☒ Other (specify): 1984 Primary

Occupation

President

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

3,550.00

TOTAL This Period (last page this line number only)

A 3020051547

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Campaign

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-------------------------|----------------------------------|------------------------------------|
| Thomas Fuller 3018 Springcrest Drive Louisville, Ky. 40222 | Thomas Industries | 6/20/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: President | Aggregate Year-to-Date-\$500.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| James A. Kegley 2051 Manor Dr. Lexington, Ky. 40502 | | 6/20/83 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Occupation | 6/20/83 | 1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| paul Tafel, Jr. 506 Country Lane Louisville, Ky. 40207 | | 6/20/83 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Retired | Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| D. D. Gregory 11106 Owl Creek Lane Louisville, Ky. 40223 | Self-Builder/Dev. | 6/21/83 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primry | Occupation: Builder | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Samuel Pollitt, III 12413 Lucas Lane Louisville, Ky. 40223 | Self-Builder/Dev. | 6/21/83 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Real Estate | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mark B. Davis, Jr. 450 Swing Lane Louisville, Ky. 40207 | Self | 6/22/83 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Attorney | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mary S. Doll 5001 Avish Lane Harrods Creek, Ky. 40027 | Self | 6/22/83 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Occupation: Housewife | 6/22/83 | 1,000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 6,000.00 |
| TOTAL This Period (last page this line number only) | | | |

83020051548

SCHEDULE A

ITEMIZED RECEIPTS

Page 15 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Sloane Graff, Jr.
 3900 Barbour Lane
 Louisville, Ky. 40222

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

6/22/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Neil Huffman
 7501 Hunting Creek Drive
 Prospect, Ky. 40059

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Self

6/22/83

250.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Don G. McClinton
 6205 Deep Creek Drive
 Prospect, Ky. 40059

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Yellow Cab Co.

6/22/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Jane A. McClinton
 6205 Deep Creek Drive
 Prospect, Ky. 40059

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Housewife

6/22/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Patrick H. Mitchell
 1520 Castlewood
 Louisville, Ky. 40204

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Mitchell & Henson

6/22/83

1000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Claude C. White
 P.O. Box 1208
 Birmingham, Al. 35201

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

6/22/83

1000.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Cecil C. Barnett
 318 Mockingbird Valley
 Louisville, Ky. 40207

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Tube Turns

6/23/83

500.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)

9
4
5
1
5
4
9

C

SCHEDULE A

ITEMIZED RECEIPTS

Page 16 of 32 for
 LINE NUMBER 11a
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-------------------------|-----------------------------------|------------------------------------|
| E. D. Canan Old Louisville Road Fisherville, Ky. 40023 | Self | 6/23/83 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date-\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| J. E. Edens Box 248, Route 2 Shelbyville, Ky. 40065 | | 6/23/83 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Retired | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Shelly Frank Chi-Chi's Restaurant 10002 Shelbyville Rd. Louisville, Ky. 40222 | Chi Chi's Restaurant | 6/23/83 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation President | Aggregate Year-to-Date-\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Daniel P. Garcia 1714 Dundee Way Louisville, Ky. 40205 | Self | 4/18/83 6/23/83 | 250.00 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date-\$ 750.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| James E. Hardy 16 Indian Hills Trail Louisville, Ky. 40207 | Brinley Hardy Co. | 6/23/83 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation President | Aggregate Year-to-Date-\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| I. W. Hughes 159 Westwind Road Louisville, Ky. 40207 | Brown & Williamson | 6/23/83 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Executive | Aggregate Year-to-Date-\$ 300.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Florence J. Hume 2012 Starmont Road Louisville, Ky. 40207 | | 6/23/83 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation Homemaker | Aggregate Year-to-Date-\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4,300.00 |
| TOTAL This Period (last page this line number only) | | | |

93020051550

SCHEDULE A

ITEMIZED RECEIPTS

Page 17 of 32 for
LINE NUMBER 117
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|-------------------------|------------------------------------|
| Carroll L. Lurding P.O. Box 7461 326 Mockingbird Hill Rd. Louisville, Ky. 40207 | Self | 5/27/83 | 25.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Homebuilder Aggregate Year-to-Date-\$ 525.00 | 6/23/83 | 500.00 |
| B. Full Name, Mailing Address and ZIP Code E. J. McGrath 1400 Willow, #1706-8 Louisville, Ky. 40204 | Self | 6/23/83 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Aggregate Year-to-Date-\$ 300.00 | | |
| C. Full Name, Mailing Address and ZIP Code W. H. Millard, Jr. 7913 Rose Island Rd. Prospect, Ky. 40059 | Transit Oil Co. | 6/23/83 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Chairman of Board Aggregate Year-to-Date-\$ 500.00 | | |
| D. Full Name, Mailing Address and ZIP Code Jennye S. Smock Box 173 Riverwood Drive Murray, Ky. 42071 | | 6/23/83 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Occupation: Homemaker Aggregate Year-to-Date-\$ 2000.00 | 6/23/83 | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code Joseph E. Stopher 416 Jarvis Lane Louisville, Ky. 40207 | | 6/23/83 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Attorney Aggregate Year-to-Date-\$ 500.00 | | |
| F. Full Name, Mailing Address and ZIP Code Seth W. Hancock Claiborne Farm, Rt.2 Paris, Ky. 40361 | Self | 6/24/83 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | Occupation: Thoroughbred Breeder Aggregate Year-to-Date-\$ 500.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Charles T. Steadman 429 6th Avenue Huntington, W.V. 25701 | Cavalier Enterprises | 6/24/83 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Occupation: Aggregate Year-to-Date-\$ 2000.00 | 6/24/83 | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 6,325.00 |
| TOTAL This Period (last page this line number only) | | | |

9302005153

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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Name of Committee (in Full)

| | | | | | |
|---|--|---|--|---|--|
| Name of Committee (in Full) McConnell Senate Committee | | Name of Employer Lou. Cement Co. | | Date (month, day, year) 6/27/83 | Amount of Each Receipt this Period 500.00 |
| A. Full Name, Mailing Address and ZIP Code Gene P. Gardner 8914 Ayrshire Avenue Louisville, Ky. 40222 | | Occupation Manager | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date--\$ 500.00 | | | |
| B. Full Name, Mailing Address and ZIP Code Thomas L. Hensley 6206 N. Hitt Rd. Louisville, Ky. 40222 | | Name of Employer Druthers | | Date (month, day, year) 6/27/83 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation President | | | |
| | | Aggregate Year-to-Date--\$ 500.00 | | | |
| C. Full Name, Mailing Address and ZIP Code Ann W. Jay 416 Mockingbird Hill Rd. Louisville, Ky. 40207 | | Name of Employer Homemaker | | Date (month, day, year) 6/27/83 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Homemaker | | | |
| | | Aggregate Year-to-Date--\$ 1000.00 | | | |
| D. Full Name, Mailing Address and ZIP Code John M. Nichols 700 Blankenbaker Lane Louisville, Ky. 40207 | | Name of Employer Coopers & Lybrand | | Date (month, day, year) 6/27/83 | Amount of Each Receipt This Period 750.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Accountant | | | |
| | | Aggregate Year-to-Date--\$ 750.00 | | | |
| E. Full Name, Mailing Address and ZIP Code Gerald B. Anderson 126 Burnley Louisville, Ky. 40243 | | Name of Employer Gibbs-Inman Co. | | Date (month, day, year) 6/28/83 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Exec. V-P | | | |
| | | Aggregate Year-to-Date--\$ 500.00 | | | |
| F. Full Name, Mailing Address and ZIP Code Charles M. Brohm 5902 Foxcroft Road Prospect Ky. 40059 | | Name of Employer Hospital-Child Protective Services | | Date (month, day, year) 6/28/83 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Doctor | | | |
| | | Aggregate Year-to-Date--\$ 250.00 | | | |
| G. Full Name, Mailing Address and ZIP Code C. T. Cone 1101 Alta Vista Rd. Louisville, Ky. 40207 | | Name of Employer Stoll, Keenon and Park | | Date (month, day, year) 6/28/83 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary | | Occupation Advertising | | | |
| | | Aggregate Year-to-Date--\$ 1000.00 | | | |
| SUBTOTAL of Receipts This Page (optional) | | | | | 4,500.00 |
| TOTAL This Period (last page this line number only) | | | | | |

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SCHEDULE A

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Page 19 of 32 for
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 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-----------------------------|------------------------------------|------------------------------------|
| Louis R. Glogower, Jr. 5100 Brownsboro Rd, #732 Louisville, KY 40222 | | 6/28/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation | Aggregate Year-to-Date—\$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| John S. Greenebaum 2233 Douglass Blvd. Louisville, KY 40205 | Self | 6/28/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Attorney | Aggregate Year-to-Date—\$ 1,000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Alex M. Forrester 3716 Fairway Lane Louisville, KY 40207 | Self | 6/29/83 6/29/83 | \$1,000.00 \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General | Occupation Doctor | Aggregate Year-to-Date—\$ 2,000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| James Gilbert 1001 Outer Loop Louisville, KY 40219 | Gilbert & Mitchell | 6/29/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Self Employed | Aggregate Year-to-Date—\$ 1,000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Kenneth R. Jaegers 515 Tiffany Lane Louisville, KY 40207 | Self | 6/29/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date—\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Robert G. Raque 2904 Falmouth Drive Louisville, KY 40205 | Sedco, Inc. | 6/29/83 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation President | Aggregate Year-to-Date—\$ 1,000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Martine C. Tway 2601 S. 3rd Street Louisville, KY 40208 | | 6/29/83 6/29/83 | \$1,000.00 \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General | Occupation Homemaker | Aggregate Year-to-Date—\$ 1,500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$7,500.00 |
| TOTAL This Period (last page this line number only) | | | |

3
5
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SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

G.T. Underhill
 1806 Knollwood Road
 Louisville, KY 40207

Name of Employer

G. T. Underhill
 & Associates

Date (month,
 day, year)

6/29/83

Amount of Each
 Receipt This Period
 \$250.00

Occupation

General Partner

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$250.00

B. Full Name, Mailing Address and ZIP Code

Robert P. Adelberg, Jr.
 94 Valley Road
 Louisville, KY 40204

Name of Employer

Self

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$500.00

Occupation

Real Estate

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Bentley Badgett, II
 220 N. Main Street
 Madisonville, KY 42431

Name of Employer

Self

Date (month,
 day, year)

6/30/83;
 6/30/83

Amount of Each
 Receipt This Period

\$1,000.00
 \$1,000.00

Occupation

Coal Operator

Receipt For:

☒ Primary

☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date—\$ 2,000.00

D. Full Name, Mailing Address and ZIP Code

Rogers Badgett
 Madisonville, KY 42431

Name of Employer

Self

Date (month,
 day, year)

6/30/83
 6/30/83

Amount of Each
 Receipt This Period

\$1,000.00
 \$1,000.00

Occupation

Investor

Receipt For:

☒ Primary

☒ General

☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date—\$ 2,000.00

E. Full Name, Mailing Address and ZIP Code

K.N. Berry
 635 West Main Street
 Louisville, KY 40202

Name of Employer

K. Norman Berry
 ASSOC.

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$1,000.00

Occupation

Architect

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 1,000.00

F. Full Name, Mailing Address and ZIP Code

Ed Butler
 2221 Buechel Road
 Louisville, KY 40218

Name of Employer

Self

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$500.00

Occupation

Homebuilder

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

G. Full Name, Mailing Address and ZIP Code

William C. Cheatham, Jr.
 7203 Fox Harbor Road
 Prospect, KY 40059

Name of Employer

Self

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$500.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date—\$ 500.00

SUBTOTAL of Receipts This Page (optional)

\$6,750.00

TOTAL This Period (last page this line number only)

4
5
1
5
0
0
2
3
A

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Bernard A. Dahlem
 604 Briar Hill Road
 Louisville, KY 40206

Name of Employer

Dahlem Const. Co.

Date (month,
day, year)

6/30/83
 6/30/83

Amount of Each
 Receipt This Period
 \$500.00
 \$250.00

Occupation

Construction

Receipt For:

☒ Primary☒ General☐ Other (specify): 1984 Primary & General

Aggregate Year-to-Date-\$ 750.00

B. Full Name, Mailing Address and ZIP Code

Chester L. Davidson, M.D.
 4001 Dutchmans Lane
 Suburban Medical Plaza, 6C
 Louisville, KY 40207

Name of Employer

Self

Date (month,
day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$500.00

Occupation

Doctor

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Malcolm M. Decamp
 615 Club Lane
 Louisville, KY 40207

Name of Employer

Faversham World Travel

Date (month,
day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$500.00

Occupation

Executive

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Roland Giradet
 3121 Runnymede Road
 Louisville, KY 40222

Name of Employer

Medical Towers Nor.

Date (month,
day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$400.00

Occupation

Doctor

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 400.00

E. Full Name, Mailing Address and ZIP Code

J.J. Guarnaschelli, M.D.
 568 Medical Towers South
 Louisville, KY 40202

Name of Employer

Self

Date (month,
day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$300.00

Occupation

Doctor

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$300.00

F. Full Name, Mailing Address and ZIP Code

Ronald D. Hogart
 4017 Buffalo Trace
 Madisonville, KY 42431

Name of Employer

Date (month,
day, year)

6/30/83

Amount of Each
 Receipt This Period
 \$1,000.00

Occupation

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

Wesley S. Johnson
 2315 Clarkwood Drive
 Louisville, KY 40207

Name of Employer

Blue Boar Exec. Office

Date (month,
day, year)

2/14/83

6/30/83

Amount of Each
 Receipt This Period
 \$100.00
 \$500.00

Occupation

Executive

Receipt For:

☒ Primary☐ General☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 600.00

SUBTOTAL of Receipts This Page (optional)

\$4,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11A
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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|------------------------------------|------------------------------------|
| Nancy H. Jones 901 Rugby Place Louisville, KY 40222 | Housewife | 6/30/83 6/30/83 | \$1,000.00 \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General | | Aggregate Year-to-Date-\$ 2,000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Joseph E. Knight 1850 Lakeview Drive Madisonville, KY 42431 | | 6/30/83 6/30/83 | \$1,000.00 \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & General | | Aggregate Year-to-Date-\$ 2,000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Richard M. Knox 5228 Moccasin Trail Louisville, KY 40207 | Self | 6/30/83 | \$350.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 350.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Lynn M. Koggan 1020 Everett Avenue Louisville, KY 40204 | | 6/30/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| J.G. Lang, Jr. P.O. Box 190 Goshen, KY 40026 | | 6/30/83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Phillip J. Levy 5305 Glencrest Drive Glenview, KY 40025 | Self-Levy Lumber & Building President | 6/30/83 | \$750.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 750.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Frank Lipshcutz 13904 Bell Vista Ct., North Prospect, KY 40059 | Self | 6/30/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$6,350.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 23 of 32 for
 LINE NUMBER 11A
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|-----------------------------------|------------------------------------|
| Robert H. Loeb 7807 Westover Dr. Louisville, KY 40202 | Self | 6/30/83 | \$350.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Insurance | Aggregate Year-to-Date-\$ 350.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ronald R. Masden M.D. 616 Medical Towers North Louisville, KY 40202 | Self | 6/30/83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Vivian M. Mattingly 12701 Cedar Creek Rd. Louisville, KY 40202 | Mattingly Heating & Cooling & Plumbing | 6/30/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Secretary/Treasurer | Aggregate Year-to-Date-\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Clay L. Morton 398 Mockingbird Valley Rd Louisville, KY 40207 | Self | 6/30/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Attorney | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Lynn L. Ogden 3703 Ten Broeck Way Louisville, KY 40222 | Self | 6/30/83 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Joan Pelle 4922 Swaps Lane Louisville, KY 40216 | D. J. Inc. | 6/30/83 | \$300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Bookkeeper | Aggregate Year-to-Date-\$ 300.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| John R. Raker 3109 Springcrest Drive Louisville KY 40222 | | 6/30/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$3150.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
 category of the Detailed
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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|------------------------------------|-------------------------|------------------------------------|
| Nancy B. Rash 545 Barberry Lane Louisville KY, 40206 | | 6/30/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Housewife | | |
| | Aggregate Year-to-Date-\$ | 100.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| William J. Receveur, Jr. 1324 Navajo Ct Louisville, KY 40207 | Garst-Receveur Construction Co. | 6/30/83 | \$350.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary & Gen | Occupation President | 6/30/83 | \$350.00 |
| | Aggregate Year-to-Date-\$ | 700.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Jan M. Reeves 2911 Seneca Park Louisville, KY 40205 | Mason Rudd | 6/30/83 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Ex. Secretary | | |
| | Aggregate Year-to-Date-\$ | 500.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Robert W. Rounsavall, III 7501 Covered Bridge Road Prospect, KY 40059 | Dixie Warehouse Cartage Co. | 4/20/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation President | 6/30/83 | \$150.00 |
| | Aggregate Year-to-Date-\$ | 350.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| George B. Sanders 20 Stonebridge Rd. Louisville, KY 40207 | Self | 1/05/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Doctor | 6/30/83 | \$100.00 |
| | Aggregate Year-to-Date-\$ | 300.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| R.E. Smith 13005 Covered Bridge Rd. Prospect KY 40059 | Self | 6/30/83 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation | 6/30/83 | 1000.00 |
| | Aggregate Year-to-Date-\$ | 2000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Richard D. Thurman 10000 Shelbyville Road Louisville KY 40203 | Self | 6/30/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1984 Primary | Occupation Real Estate | 6/30/83 | \$1000.00 |
| | Aggregate Year-to-Date-\$ | 2000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | \$6850.00 |
| TOTAL This Period (last page this line number only) | | | |

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8

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
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 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Henry C. Wagner
7106 Greengate Court
Louisville, KY 40222

Name of Employer

Jewish Hospital

Date (month,
day, year)

6/30/83

Amount of Each
Receipt this Period

\$500.00

Occupation
President

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

M.M. Weiss, Jr.
250 E. Liberty
Louisville, KY 40202

Name of Employer

Self

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period

\$300.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Thomas W. Wolff
250 E. Liberty St. #10001
Louisville, KY 40202

Name of Employer

Self

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period

\$250.00

Occupation

Doctor

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Joseph B. Woodlief
331 Zorn Avenue, #5
Louisville, KY 40206

Name of Employer

Glenmore Distilleries

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period

\$300.00

Occupation

Executive

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 300.00

E. Full Name, Mailing Address and ZIP Code

John J. Werst, Jr.
1401 Northwind Road
Louisville, Ky. 40207

Name of Employer

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period

\$300.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

\$1,650.00

TOTAL This Period (last page this line number only)

9
5
1
5
0
5
1
5
0
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2
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3
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3
A

SCHEDULE A

ITEMIZED RECEIPTS

Page 26 of 32 for
 LINE NUMBER 11a
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

M. K. Paradis
 3919 Brookfield Avenue
 Louisville, Ky. 40207

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt this Period

Occupation

5/31/83
 5/11/83

\$200.00
 \$200.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary & General

Aggregate Year-to-Date-\$ 400.00

B. Full Name, Mailing Address and ZIP Code

Mary H. Paradis
 P.O. Box 215
 Goshen, Ky. 40026

Name of Employer

Parahart Corp.

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

5/11/83
 5/11/83

\$200.00
 \$200.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary & Gen.

Asst. Property Mgr.

Aggregate Year-to-Date-\$ 400.00

C. Full Name, Mailing Address and ZIP Code

Douglas Wilkerson
 2715 Diana Drive
 Sellersburg, IN. 47172

Name of Employer

Luckett & Farley
 Architects

Date (month,
 day, year)

6/1/83

Amount of Each
 Receipt This Period
 \$200.00
 \$200.00

Occupation

V.P. & Treasurer

Aggregate Year-to-Date-\$ 400.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary & General

D. Full Name, Mailing Address and ZIP Code

Cynthia M. Adelberg
 94 Valley Road
 Louisville, KY. 40204

Name of Employer

Occupation Housewife

Date (month,
 day, year)

6/30/83

Amount of Each
 Receipt This Period

\$500.00

Receipt For: ☒ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Walter K. Badenhausen, Jr.
 364 Medical Towers South
 Louisville, KY 40202

Name of Employer

Self

Date (month,
 day, year)

5/3/83

Amount of Each
 Receipt This Period
 \$1,000.00

Occupation Physician

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 1,000.00

F. Full Name, Mailing Address and ZIP Code

Thomas K. Baer
 2707 Citizens Plaza
 Louisville, KY 40202

Name of Employer

Arthur Young & Co.

Date (month,
 day, year)

6/29/83

Amount of Each
 Receipt This Period

\$1,000.00

Occupation

CPA

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

Harold W. Cates
 7 Arrowhead Road
 Louisville, Ky 40207

Name of Employer

Self

Date (month,
 day, year)

6/27/83

Amount of Each
 Receipt This Period

\$1,000.00

Occupation

Real Estate

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 1200.00

SUBTOTAL of Receipts This Page (optional)

4,700.00

TOTAL This Period (last page this line number only)

93020051560

SCHEDULE A

ITEMIZED RECEIPTS

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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Ronald E. Kendall 350 Chanda Lane New Albany, IN 47150 | Name of Employer Lockett & Farley Architects | Date (month, day, year) 6/1/83 6/1/83 | Amount of Each Receipt this Period \$200.00 \$200.00 |
| | Occupation Sr. Vice President | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General | Aggregate Year-to-Date-\$ 400.00 | | |
| B. Full Name, Mailing Address and ZIP Code Michael J. Kronn 3784 Jamaica Court Lexington, KY. 40519 | Name of Employer Brandeis Machinery & Supply Co. | Date (month, day, year) 5/11/83 5/11/83 | Amount of Each Receipt This Period \$200.00 \$200.00 |
| | Occupation Sales Executive | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General | Aggregate Year-to-Date-\$400.00 | | |
| C. Full Name, Mailing Address and ZIP Code Charles H. Leis 1010 Colonel Anderson Pkwy. Louisville, KY 40222 | Name of Employer | Date (month, day, year) 5/11/83 5/11/83 | Amount of Each Receipt This Period \$200.00 \$200.00 |
| | Occupation | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & General | Aggregate Year-to-Date-\$ 400.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mary D. Leis 1010 Colonel Anderson Pkwy. Louisville, KY 40222 | Name of Employer | Date (month, day, year) 5/11/83 5/11/83 | Amount of Each Receipt This Period \$200.00 \$200.00 |
| | Occupation | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Aggregate Year-to-Date-\$ 400.00 | | |
| E. Full Name, Mailing Address and ZIP Code J.A. Paradis P.O. Box 32230 Louisville, Ky. 40232 | Name of Employer Brandeis Equipment | Date (month, day, year) 5/11/83 5/11/83 | Amount of Each Receipt This Period \$200.00 \$200.00 |
| | Occupation Chairman of Board | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Aggregate Year-to-Date-\$ 400.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mrs. J. A. Paradis 540 Fairfield Road Louisville, Ky. 40206 | Name of Employer | Date (month, day, year) 5/11/83 5/11/83 | Amount of Each Receipt This Period \$200.00 \$200.00 |
| | Occupation Homemaker | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Aggregate Year-to-Date-\$400.00 | | |
| G. Full Name, Mailing Address and ZIP Code Joseph A. Paradis, III P.O. Box 32230 Louisville, Ky. 40232 | Name of Employer Brandeis Equipment | Date (month, day, year) 5/11/83 5/11/83 | Amount of Each Receipt This Period \$200.00 \$200.00 |
| | Occupation President | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Aggregate Year-to-Date-\$ 400.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2,800.00 |
| TOTAL This Period (last page this line number only) | | | |

1561002038

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)
McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|-----------------------------------|------------------------------------|
| Joseph C. Corradino 1505 Sylvan Court Louisville, Ky. 40205 | Schimpeler-Corradino | 6/29/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Consultant | Aggregate Year-to-Date-\$1,000.00 | |
| B. Full Name, Mailing Address and ZIP Code Samuel G. Dabney P.O. Box 4547 Louisville, Ky. 40204 | Standard Foods | 6/17/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Businessman | Aggregate Year-to-Date-\$1,000.00 | |
| C. Full Name, Mailing Address and ZIP Code Watson B. Dabney 545 S. Third Street Louisville, Ky. | Hilliard-Lyons | 5/5/83 5/5/83 | \$500.00 \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Sr. Exec. | Aggregate Year-to-Date-\$1,000.00 | |
| D. Full Name, Mailing Address and ZIP Code William W. Davis 310 W., Liberty, Suite 403 Louisville, Ky. 40202 | Self | 6/8/83 | \$450.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Attorney | Aggregate Year-to-Date-\$450.00 | |
| E. Full Name, Mailing Address and ZIP Code Lawrence E. Forgy, Jr. 213 Chinoe Road Lexington, Ky. 40502 | Self | 6/7/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Attorney | Aggregate Year-to-Date-\$1,000.00 | |
| F. Full Name, Mailing Address and ZIP Code James L. Gibson 1836 Yale Drive Louisville, Ky. 40205 | Bickel-Gibson Assoc. Architects, Inc. | 6/20/83 | \$300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Architect | Aggregate Year-to-Date-\$300.00 | |
| G. Full Name, Mailing Address and ZIP Code K. E. Hall 820 Rugby Place Louisville, Ky. 40222 | Hall Contracting | 6/20/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation President | Aggregate Year-to-Date-\$1,000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 5,750.00 |
| TOTAL This Period (last page this line number only) | | | |

93020051562

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)
McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-------------------------|------------------------------------|
| William E. Hellman 3225 Murray Hill Pike Louisville, Ky. 40222 | Stites, McElwain & Fowler Occupation: Attorney | 6/17/83 | \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date-\$ 500.00 | | |
| B. Full Name, Mailing Address and ZIP Code Weldon Hewitt Mockingbird Valley-Overbrook RD. Louisville, Ky. 40207 | Audio Systems Occupation: Principal | 5/18/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date-\$ 1,000.00 | | |
| C. Full Name, Mailing Address and ZIP Code Henry B. Huff 170 Westwind Rd. Louisville, Ky. 40207 | Self Occupation: Attorney | 3/17/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date-\$ 1,000.00 | | |
| D. Full Name, Mailing Address and ZIP Code Samuel M. Klein 6005 Orion Road Louisville, Ky. 40222 | Bank of Louisville Occupation: Chief Exec. Officer | 6/17/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date-\$ 1,000.00 | | |
| E. Full Name, Mailing Address and ZIP Code Patrick R. Lancaster 1100 Bluegrass Pkwy. Louisville, Ky. 40299 | Lantech, Inc. Occupation: President | 6/22/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date-\$ 1,000.00 | | |
| F. Full Name, Mailing Address and ZIP Code John S. Lenihan 1400 Willow Louisville, Ky. 40204 | Dixie Beer Dist. Occupation: President | 5/2/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date-\$ 1,000.00 | | |
| G. Full Name, Mailing Address and ZIP Code Paul Lichtefeld 991 Logan Street Louisville, Ky. 40204 | Lichtefeld Const. Co. Occupation: Owner | 6/29/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Aggregate Year-to-Date-\$ 1,000.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 6,500.00 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE A

ITEMIZED RECEIPTS

Page 30 of 32 for
LINE NUMBER 11a
(Use separate schedules for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Stephen A. Linker
500 Starks Bldg.
Louisville, Ky. 40202

Name of Employer

Linker Capital
Management, Inc.

Date (month,
day, year)

6/24/83

Amount of Each
Receipt this Period

\$1,000.00

Occupation

Investment Advisor

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

William H. Lomicka
573 Sunnyside Drive
Louisville, Ky. 40206

Name of Employer

Humana, Inc.

Date (month,
day, year)

6/28/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Executive

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 1,000.00

C. Full Name, Mailing Address and ZIP Code

Nelson Miller
317 Ash Avenue
Pewee Valley, Ky. 40056

Name of Employer

Self

Date (month,
day, year)

5/24/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Mortgage Banker.

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Robert A. Miller
1222 Manitau Ave.
Louisville, Ky. 40215

Name of Employer

Jefferson Co. Govt.

Date (month,
day, year)

6/13/83

Amount of Each
Receipt This Period

\$50.00

Occupation

Secretary for Finan.

6/28/83

\$850.00

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$900.00

E. Full Name, Mailing Address and ZIP Code

Samuel G. Miller
10507 Timberwood Circle, St. 208
Louisville, Ky. 40223

Name of Employer

Southern Styles
Management Co.

Date (month,
day, year)

5/2/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Broker

6/24/83

\$500.00

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 1,000.00

F. Full Name, Mailing Address and ZIP Code

Robert M. Nash
12100 Covered Bridge Rd.
Prospect, Ky. 40059

Name of Employer

Glenmore Distilleries

Date (month,
day, year)

5/10/83

Amount of Each
Receipt This Period

\$1,000.00

Occupation

Vice Chairman

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 1,000.00

G. Full Name, Mailing Address and ZIP Code

Marshall M. Royce
34 Stonebridge Road
Louisville, Ky. 40207

Name of Employer

NTVL

Date (month,
day, year)

6/27/83

Amount of Each
Receipt This Period

\$500.00

Occupation

Insurance Exec.

Receipt For: ☐ Primary ☒ General

☒ Other (specify): 1984 General

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

5900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 31 of 32 for
LINE NUMBER 117
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|------------------------------------|--|
| Mrs. W. F. Rubel Mockingbird Valley Road Louisville, Ky. 40207 | | 5/2/83 | \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Housewife | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mason C. Rudd 7915 Westover Dr. Prospect, Ky. 40059 | Name of Employer Self | Date (month, day, year) 6/30/83 | Amount of Each Receipt This Period \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Construction Co. Pres | Aggregate Year-to-Date-\$ 1,000.00 | |
| C. Full Name, Mailing Address and ZIP Code Allan B. Solomon 3203 Innes Trace Court Louisville, Ky. 40222 | Name of Employer Barnett & Alagia | Date (month, day, year) 6/21/83 | Amount of Each Receipt This Period \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Attorney | Aggregate Year-to-Date-\$ 1,000.00 | |
| D. Full Name, Mailing Address and ZIP Code Larry J. Steinberg 510 W. Broadway Louisville, Ky. 40202 | Name of Employer Touche Ross & Co. | Date (month, day, year) 6/20/83 | Amount of Each Receipt This Period \$500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation CPA | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code W. W. Townes 542 Garden Dr. Louisville, Ky. 40206 | Name of Employer Self | Date (month, day, year) 6/23/83 | Amount of Each Receipt This Period \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Attorney | Aggregate Year-to-Date-\$ 1,000.00 | |
| F. Full Name, Mailing Address and ZIP Code William T. Warner 730 W. Main Street Louisville, Ky. 40202 | Name of Employer Self | Date (month, day, year) 6/1/83 | Amount of Each Receipt This Period \$1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1984 General | Occupation Attorney | Aggregate Year-to-Date-\$ 1,000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | 5,500.00 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE A

ITEMIZED RECEIPTS

Page 32 of 32 for
LINE NUMBER 11a
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| Name of Committee (in Full) | | | |
|--|-------------------------------------|-----------------------------------|------------------------------------|
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Robert S. Allison 410 Club Lane Louisville, Ky. 40207 | Doe-Aderson Adv. | 6/30/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | 6/30-83 | \$200.00 |
| <input checked="" type="checkbox"/> Other (specify): 1984 General & Primary | President | Aggregate Year-to-Date-\$ 400.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ray C. Dauenhauer, Jr. 1519 Sylvan Way Louisville, Ky. 40205 | Dauenhauer Plumbing | 3/31/83 | \$1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | 5/27/83 | 50.00 |
| <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Contractor | Aggregate Year-to-Date-\$ 1050.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dennis C. Dewitt 401 Dorsey Way Louisville, Ky. 40223 | Luckett & Farley Architects | 6/1/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | 6/1/83 | \$200.00 |
| <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Architect | Aggregate Year-to-Date-\$ 400.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Virginia B. Glass 4002 Ormond Road Louisville, Ky. 40207 | | 6/30/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | 6/30/83 | \$200.00 |
| <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Homemaker | Aggregate Year-to-Date-\$ 400.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| W. C. Glass 4002 Ormond Road Louisville, Ky. 40207 | Arctic, Inc. | 6/30/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | 6/30/83 | \$200.00 |
| <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | President | Aggregate Year-to-Date-\$ 400.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| John C. Johnston 704 Cadagon Court Louisville, Ky. 40222 | Brandeis Machinery and Supply Corp. | 5/11/83 | \$200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | 5/11/83 | \$200.00 |
| <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | V.P. & Gen. Sales Mgr. | Aggregate Year-to-Date-\$ 400.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Morton Kasdan PO Box 6095 Louisville, Ky. 40206 | Self | 1/6/83p | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | 6/30/83g | \$100.00 |
| <input checked="" type="checkbox"/> Other (specify): 1984 Primary & Gen. | Doctor | Aggregate Year-to-Date-\$ 1100.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4,150.00 |
| TOTAL This Period (last page this line number only) | | | 164,875.00 |

6
5
6
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2
0
3
0

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 116
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

General E. P.A.C.
Fairfield, CT 06431

Name of Employer

Date (month,
day, year)

6/28/83

Amount of Each
Receipt this Period
\$500.00

Occupation

Political Action Com.

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Coopers & L. P.A.C.
1800 M. Street N.W.
Washington, D.C. 20036

Name of Employer

Coopers & Lybrand
C.P.A.'s

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period
\$250.00

Occupation

Political Action Com.

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

The Life Underwriters P.A.C.
1922 F. Street N.W.
Washington, D.C. 20006

Name of Employer

Date (month,
day, year)

6/30/83

Amount of Each
Receipt This Period
\$1500.00

Occupation

Political

Receipt For: ☒ Primary ☐ General

☒ Other (specify): 1984 Primary

Aggregate Year-to-Date-\$ 1500.00

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

\$2,250.00

TOTAL This Period (last page this line number only)

\$2,250.00

7
5
6
7
0
5
1
5
6
7
0
2
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3
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3

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Cash Equivalent Fund, Inc.
 120 S. LaSalle St.
 Chicago, Ill. 60603

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt this Period

Occupation

1-19-83

1,197

Receipt For: ☐ Primary ☐ General

☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$ 1,197

B. Full Name, Mailing Address and ZIP Code

Bank of Louisville
 500 West Broadway
 Louisville, Ky. 40202

Name of Employer

Date (month,
 day, year)
 Monthly,
 Feb. —
 June

Amount of Each
 Receipt This Period

Occupation

6,240

Receipt For: ☐ Primary ☐ General

☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$ 6,240

C. Full Name, Mailing Address and ZIP Code

Liberty National Bank
 416 West Jefferson St.
 Louisville, Ky. 40202

Name of Employer

Date (month,
 day, year)
 Monthly,
 Feb. —
 June

Amount of Each
 Receipt This Period

Occupation

2,292

Receipt For: ☐ Primary ☐ General

☒ Other (specify): Interest on investment

Aggregate Year-to-Date—\$ 2,292

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

9,729

TOTAL This Period (last page this line number only)

9,729

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 4 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page.)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| ABC Printing Company 3520 College Drive Jeffersontown, Ky. 40059 | Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 1-3-83 1-26-83 4-2-83 | 862 178 42 |
| B. Full Name, Mailing Address and ZIP Code Ailes Communications, Inc. 456 West 43rd St. New York, N.Y. 10030 | Purpose of Disbursement Media & campaign consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 4-29-83 5-31-83 | Amount of Each Disbursement This Period 2,000 2,000 |
| C. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, Fla. 32202 | Purpose of Disbursement Computer programming and services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 4-2-83 5-5-83 | Amount of Each Disbursement This Period 2,636 1,583 |
| D. Full Name, Mailing Address and ZIP Code Dulworth Office Equipment 204 E. Market St. Louisville, Ky. 40202 | Purpose of Disbursement File cabinets Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 2-16-83 | Amount of Each Disbursement This Period 750 |
| E. Full Name, Mailing Address and ZIP Code Faversham World Travel 2843 Brownsboro Road Louisville, Ky. 40206 | Purpose of Disbursement Air travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 6-15-83 | Amount of Each Disbursement This Period 256 |
| F. Full Name, Mailing Address and ZIP Code Internal Revenue Service Memphis, Tenn. 38101 | Purpose of Disbursement 1982 income tax-Form 1120POL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 3-15-83 | Amount of Each Disbursement This Period 722 |
| G. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc. 332 Capitol Avenue Frankfort, Ky. 40601 | Purpose of Disbursement Clipping service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 5-5-83 | Amount of Each Disbursement This Period 201 |
| H. Full Name, Mailing Address and ZIP Code R. Kern 4510 Mt. Vernon Road Louisville, Ky. 40220 | Purpose of Disbursement Air Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 2-16-83 4-2-83 | Amount of Each Disbursement This Period 50 172 |
| I. Full Name, Mailing Address and ZIP Code Kingfish Restaurants 140 N. 6th St. Louisville, Ky. 40202 | Purpose of Disbursement Food for rally Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 6-16-83 | Amount of Each Disbursement This Period 332 |
| SUBTOTAL of Disbursements This Page (optional) | | | 11,784 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 4 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Main Travel Agency 730 W. Main St. Louisville, Ky. 40202 | Air travel | 1-12-83 | 482 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 4-2-83 | 484 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mitch McConnell Jefferson County Courthouse Louisville, Ky. 40202 | Luncheons and travel reimbursement | 4-2-83 | 111 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 6-15-83 | 199 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Steve Mobley Jefferson County Courthouse Louisville, Ky. 40202 | Travel, food, printing and office supplies | 2-16-83 | 254 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 2-21-83 | 294 |
| | <input type="checkbox"/> Other (specify): | 3-18-83 | 219 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| -Continued- | | 4-2-83 | 10 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 4-14-83 | 212 |
| | <input type="checkbox"/> Other (specify): | 6-14-83 | 258 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Odell, Roper & Associates, Inc. 7316 Wisconsin Ave., Suite 507 Bethesda, Md. 20814 | Service fee, printing and mailing | 1-3-83 | 1,500 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 1-3-83 | 1,319 |
| | <input type="checkbox"/> Other (specify): | 1-4-83 | 5,901 |
| | | 1-21-83 | 1,500 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| -Continued- | | 2-16-83 | 1,736 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 4-2-83 | 3,325 |
| | <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Joseph G. Schiff 1708 Clayton Road Louisville, Ky. 40205 | Telephone and travel reimbursement | 1-3-83 | 45 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 1-26-83 | 111 |
| | <input type="checkbox"/> Other (specify): | 2-18-83 | 58 |
| | | 3-2-83 | 68 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| -Continued- | | 3-15-83 | 70 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 3-31-83 | 53 |
| | <input type="checkbox"/> Other (specify): | 4-29-83 | 96 |
| | | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Michael Shea 4601 Lincoln Road Louisville, Ky. 40220 | Travel reimbursement | 3-8-83 | 221 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 18,657 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 3 of 4 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Shively Newsweek, Inc. 4639 Dixie Highway Shively, Ky. 40216 | Printing | 1-3-83 | 659 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code SP Communications P. O. Box 974 Burlingame, CA 94010 | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Long distance telephone | 1-26-83 | 54 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 2-28-83 | 121 |
| | <input type="checkbox"/> Other (specify): | 3-23-83 | 61 |
| C. Full Name, Mailing Address and ZIP Code -Continued- | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | | 5-3-83 | 83 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 5-24-83 | 104 |
| | <input type="checkbox"/> Other (specify): | 5-24-83 | 6 |
| D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, Ky. 40201 | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Postage & postal charges | 1-3-83 | 100 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 1-3-83 | 40 |
| | <input type="checkbox"/> Other (specify): | 1-3-83 | 115 |
| E. Full Name, Mailing Address and ZIP Code -Continued- | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | | 1-31-83 | 100 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 2-24-83 | 150 |
| | <input type="checkbox"/> Other (specify): | 3-2-83 | 100 |
| F. Full Name, Mailing Address and ZIP Code -Continued- | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | | 3-8-83 | 200 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 3-18-83 | 100 |
| | <input type="checkbox"/> Other (specify): | 4-20-83 | 200 |
| G. Full Name, Mailing Address and ZIP Code -Continued- | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | | 5-10-83 | 1,750 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 5-11-83 | 1,340 |
| | <input type="checkbox"/> Other (specify): | 5-24-83 | 100 |
| H. Full Name, Mailing Address and ZIP Code -Continued- | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | | 6-7-83 | 26 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 6-7-83 | 100 |
| | <input type="checkbox"/> Other (specify): | 6-27-83 | 200 |
| I. Full Name, Mailing Address and ZIP Code Xerox Corp. 10001 Linn Station Road Louisville, Ky. 40223 | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Maintenance agreement | 1-3-83 | 225 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 1-6-83 | 112 |
| | <input type="checkbox"/> Other (specify): | 5-10-83 | 112 |
| SUBTOTAL of Disbursements This Page (optional) | | | 6,527 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 4 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code
 Zip Print
 424 W. Muhammad Ali Blvd.
 Louisville, Ky. 40202

Purpose of Disbursement

Printing

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

1-3-83

1-3-83

2-16-83

Amount of Each
Disbursement This Period

46

26

49

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

5-5-83

5-12-83

Amount of Each
Disbursement This Period

152

82

-Continued-

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)

Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Disbursements This Page (optional)

355

TOTAL This Period (last page this line number only)

37,323

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications, Inc. 456 West 43rd St. New York, N.Y. 10036 | -0- | 80,000 | 4,000 | 76,000 |
| Nature of Debt (Purpose): Media and campaign consulting | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, Ky. 40299 | 583 | 2,405 | 1,082 | 1,906 |
| Nature of Debt (Purpose): Printing | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Odell, Roper & Associates 7316 Wisconsin Ave., Suite 507 Bethesda, Md. 20814 | 8,720 | 6,561 | 15,281 | -0- |
| Nature of Debt (Purpose): Service fee, printing and mailing | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Shively Newsweek, Inc. 4939 Dixie Highway Shively, Ky. 40216 | 659 | 703 | 659 | 703 |
| Nature of Debt (Purpose): Printing | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Cybernetics & Systems, Inc. 500 Water Street Jacksonville, Fla. 32202 | -0- | 5,643 | 4,219 | 1,424 |
| Nature of Debt (Purpose): Computer programming and services | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | |
| 2) TOTAL This Period (last page this line only) | | | | 80,033 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | 80,033 |

93020051573

496
KY 40201



Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

REGISTERED

3 622 365

MAIL

WILLIAM F. HILDENBRAND
SECRETARY

OFFICE OF PUBLIC RECORDS
119 D STREET NE, No. A623
WASHINGTON, D.C. 20510
(202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20510

ALICIA RAE FISHER
SUPERINTENDENT

THE PRECEDING REPORT WAS RECEIVED: _____

_____ HAND DELIVERED _____

☒ CERTIFIED

7-30-83

_____ REGISTERED _____

_____ FEDERAL EXPRESS _____

_____ EXPRESS MAIL _____

83020051575



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20543

NOV 21 1984 HQ-5

Larry J. Steinberg, Treasurer
McCormack Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: Year End Report (7/1/83-12/31/83)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portion attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. An individual or a political committee, other than a multicandidate committee may not make contributions to a candidate for Federal office in excess of \$1,000 per election. If you have received a contribution(s) which exceeds the limits, the Commission recommends that you refund to the donor(s) the amount in excess of \$1,000. The Commission should be notified in writing if a refund is necessary. In addition, any refund should appear on Line 20 of the Detailed Summary Page of your next report. (2 U.S.C. 441a(e) and (f))

The term "contribution" includes any gift, subscription, loan, advance, or deposit of money or anything of value made by any person for the purpose of influencing any election for Federal office.

If the contribution(s) in question was incorrectly reported and/or you have additional information regarding the contributor(s), you may wish to submit documentation for the public record. Please amend your report with the clarifying information.

Although the Commission may take further legal steps concerning the acceptance of an excessive contribution(s), prompt action by you to refund the excessive amount will be taken into consideration.

84033144381

Any amendment or clarification should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9930. My local number is (202) 523-4040.

Sincerely,



Gregory Swanson
Reports Analyst
Reports Analysis Division

84033144382

THE UNIVERSITY OF CHICAGO
LIBRARY
540 EAST 57TH STREET
CHICAGO, ILL. 60637

INTERNET SECURITY

| Any information received from such reporting persons is not to be used by any person for the purpose of affecting contributions to the campaign of a Federal office, other than the person and also use of any defunct agency, nor to make a report during such contribution. | | | |
|---|--|---|---|
| Name of Reporting Person | | | |
| McConnell Senate Committee A. Full Name, Mailing Address and ZIP Code LIO P.A.C. Liberty United Bancorp. I P. O. Box 32500 Louisville, KY 40232 | | Name of Employer Occupation Political Action Committee Aggregates Year to Date - \$1500.00 | Date Received, day, year 12-16-83 Amount of Cash Received This Period \$1500.00 |
| Name on Form <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General McConnell Senate 1984 Primary | | | |
| B. Full Name, Mailing Address and ZIP Code General Electric P.A.C. Fairfield Connecticut 06431 | | Name of Employer Occupation Political Action Committee Aggregates Year to Date - \$1500.00 | Date Received, day, year 12-7-83 12-23-83 Amount of Cash Received This Period \$100.00 \$1250.00 |
| Name on Form <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General McConnell Senate 1984 Primary | | | |
| C. Full Name, Mailing Address and ZIP Code Republican Majority Fund 227 K.A. Ave., N.E. 0220 Washington, D.C. 20002 | | Name of Employer Occupation Aggregates Year to Date - \$1500.00 | Date Received, day, year 11-11-83 Amount of Cash Received This Period \$5,000.00 |
| Name on Form <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General McConnell Senate 1984 Primary | | | |
| D. Full Name, Mailing Address and ZIP Code Name on Form <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General McConnell Senate 1984 Primary | | Name of Employer Occupation Aggregates Year to Date - \$1500.00 | Date Received, day, year Amount of Cash Received This Period |
| E. Full Name, Mailing Address and ZIP Code Name on Form <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General McConnell Senate 1984 Primary | | Name of Employer Occupation Aggregates Year to Date - \$1500.00 | Date Received, day, year Amount of Cash Received This Period |
| F. Full Name, Mailing Address and ZIP Code Name on Form <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General McConnell Senate 1984 Primary | | Name of Employer Occupation Aggregates Year to Date - \$1500.00 | Date Received, day, year Amount of Cash Received This Period |
| G. Full Name, Mailing Address and ZIP Code Name on Form <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General McConnell Senate 1984 Primary | | Name of Employer Occupation Aggregates Year to Date - \$1500.00 | Date Received, day, year Amount of Cash Received This Period |
| H. Full Name, Mailing Address and ZIP Code Name on Form <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General McConnell Senate 1984 Primary | | Name of Employer Occupation Aggregates Year to Date - \$1500.00 | Date Received, day, year Amount of Cash Received This Period |
| SUBTOTAL of Receipts This Page Forward | | | \$7,850.00 |
| TOTAL This Period (All Pages of this Form) - \$7,850.00 | | | |

MICHAEL SHEA, FINANCE DIRECTOR
1941 BISHOPS LANE
LOUISVILLE KY 40218 12AM

Western Union Mailgram



4-022588S133 05/12/84 ICS IPMBNGZ CSP WHSB
5024593134 MGM TDBN LOUISVILLE KY 92 05-12 0113P EST

SECRETARY OF THE SENATE
UNITED STATES SENATE
WASHINGTON DC 20510

RECEIVED
SECRETARY OF THE SENATE
1984 MAY 14 AM 11:55
HAND DELIVERED ☒

DEAR SIR
ON MAY 11, 1984 WE RECEIVED AND DEPOSITED THE FOLLOWING CONTRIBUTIONS
TO OUR PRIMARY ELECTION ACCOUNT: DON HUFFMAN \$1,000, KIP HUFFMAN
\$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000, FIRST
KENTUCKY NATIONAL CORP \$1,000, OSCAR PENN \$1,000, JAMES PATTERSON II
\$1,000, CHARLOTTE ELAM \$1,000. WE ALSO RECEIVED THE FOLLOWING
CONTRIBUTIONS TO OUR GENERAL ELECTION ACCOUNT KIP HUFFMAN \$1,000, DON
HUFFMAN \$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000. OUR
FEC I.D. NUMBER IS C00155051.

SINCERELY,

MICHAEL SHEA, FINANCE DIRECTOR
MCCONNELL CIVIC COMMITTEE

13:17 EST

MGMCOMP

5241 (R. 7/82)

TO REPLY BY MAILGRAM MESSAGE, SEE REVERSE SIDE FOR WESTERN UNION'S TOLL - FREE PHONE NUMBERS

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 MAY 18 PM 2:48

HAND DELIVERED ☒

May 15, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):


Primary Account:

\$25,000 loan from the candidate, Mitch McConnell

General Account:

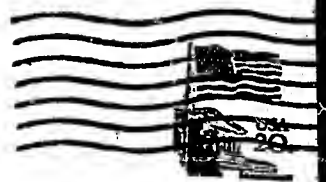
Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

atch
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201



OK

8403011

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

**HART BUILDING
SUITE 232
WASHINGTON, D.C. 20
PHONE: 202-224-03**

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: May 16, 1984

CERTIFIED _____

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

8402011053

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE
1984 MAY 21 PM 1:51
HAND DELIVERED ☒

May 15, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

Primary Account:

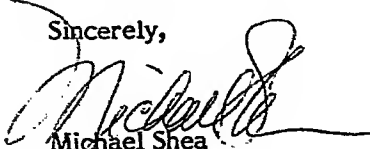
\$1000 contributions: Don Huffman, Kip Huffman, Sharon Patterson, Deborah Patterson, First Kentucky National Corp., Oscar Penn, James Patterson II, and Charlotte Elam.

General Account:

\$1000 contributions: Don Huffman, Kip Huffman, Sharon Patterson, Deborah Patterson.

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

MAILGRAM SERVICE CENTER
MIDDLETOWN, VA. 22645
12AM

Western Union Mailgram



4-0225885133002 05/12/84 ICS 1PMBNSZ CSP LVLB
1 5024593134 MGM TDBN LOUISVILLE KY 05-12 0113P EST

MICHAEL SHEA, FINANCE DIRECTOR
MCCONNELL CIVIC COMMITTEE
1941 BISHOPS LANE
LOUISVILLE KY 40213

THIS IS A CONFIRMATION COPY OF THE FOLLOWING MESSAGE:

5024593134 MGM TDBN LOUISVILLE KY 92 05-12 0113P EST
ZIP
SECRETARY OF THE SENATE
UNITED STATES SENATE
WASHINGTON DC 20510

DEAR SIR
ON MAY 11, 1984 WE RECEIVED AND DEPOSITED THE FOLLOWING CONTRIBUTIONS
TO OUR PRIMARY ELECTION ACCOUNT: DON HUFFMAN \$1,000, KIP HUFFMAN
\$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000, FIRST
KENTUCKY NATIONAL CORP \$1,000, OSCAR PENN \$1,000, JAMES PATTERSON II
\$1,000, CHARLOTTE ELAM \$1,000. WE ALSO RECEIVED THE FOLLOWING
CONTRIBUTIONS TO OUR GENERAL ELECTION ACCOUNT KIP HUFFMAN \$1,000, DON
HUFFMAN \$1,000, SHARON PATTERSON \$1,000, DEBRA PATTERSON \$1,000. OUR
FEC I.D. NUMBER IS C00155031.

SINCERELY,

MICHAEL SHEA, FINANCE DIRECTOR
MCCONNELL CIVIC COMMITTEE

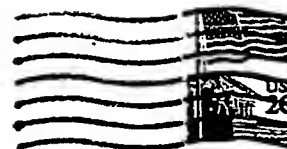
1319 EST

MGMCOMP MGM

TO REPLY BY MAILGRAM MESSAGE. SEE REVERSE SIDE FOR WESTERN UNION'S TOLL - FREE PHONE NUMBERS

itch
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201



OK

84020111

ALICIA RAE FISHER
SUPERINTENDENT

**HART BUILDING
SUITE 232
WASHINGTON, D.C. 20
PHONE: 202-224-03**

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

May 15, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

84402011253

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 MAY 22 1

HAND DELIVERED

RECEIVED AT THE FEC

84 MAY 21 9:48

May 15, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

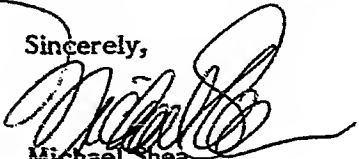
Primary Account:

\$25,000 loan from the candidate, Mitch McConnell

General Account:

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

ch
cConnell
U.S. Senate

x 1496
le, Kentucky 40201



8402011

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

NAVY BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0311

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

May 18, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

84020111467

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED,
CLERK OF THE SENATE

1984 MAY 24 AM 11:45

HAND DELIVERED ☐

May 21, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

Primary Account:

\$1,000 from Mr. F. Evans Farwell; \$1,000 from Prudential PAC; and \$3,000 from R.P.A.C. (National Association Realtors)

General Account:

Our FEC I.D. number is C00155051.

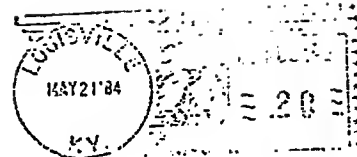
Sincerely,


Michael Shea
Finance Director

Rich
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201

OK



8-4-02011

ALICIA RAE FISHER
SUPERINTENDENT
HART BUILDING
SUITE 232
WASHINGTON, D.C. 20001
PHONE: 202-224-0100

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

8402011716

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED AT THE FEC ✓

84 MAY 25 AM 11:26

SECRETARY OF THE SENATE

1984 HL IN 15

HANDLED BY

May 23, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

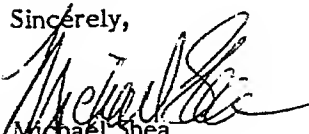
Primary Account:

\$1,000 from Mr. David Jones; \$1,000 from Mrs. Molly Leonard

General Account:

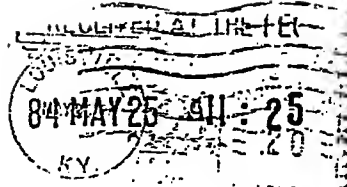
Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

itch
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201



8402011

8401215

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED:
CLERK OF THE SENATE
1984 MAY 25 AM 11:46
HAND DELIVERED ☒

May 21, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

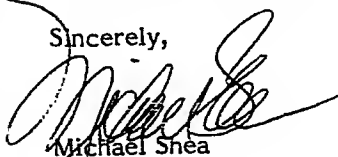
Primary Account:

\$1,000 from Mr. F. Evans Farwell; \$1,000 from Prudential PAC; and \$3,000 from R.P.A.C. (National Association Realtors)

General Account:

Our FEC I.D. number is C00155051.

Sincerely,



Michael Shea
Finance Director

ch
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201



63

1102018

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0311

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED:

May 21, 1984

CERTIFIED

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

84020112507

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
CLERK OF THE SENATE

1984 MAY 29 PM 2:32

HAND DELIVERED ☐

May 24, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

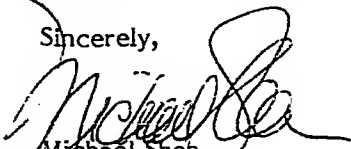
Primary Account:

\$1,000 from Mr. Ricard Ohrstrom; \$1,000 from Arlene Flahavin; \$1,000 from Dalton J. Woods; \$500 from Dr. Robert E. Windom

General Account:

Our FEC I.D. number is C00155051.

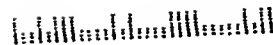
Sincerely,


Michael Shea
Finance Director

5
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McCConnell
U.S. Senate

1496
Kentucky 40201

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8-1-1-5-55

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE
1984 MAY 29 AM 10:56
HAND DELIVERED L

May 23, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

Primary Account:

\$1,000 from Mr. David Jones; \$1,000 from Mrs. Molly Leonard

General Account:

Our FEC I.D. number is C00155051.

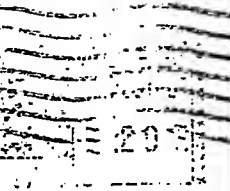
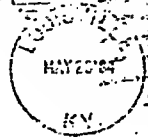
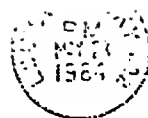
Sincerely,



Michael Shea
Finance Director

itch
McConnell
U.S. Senate

Box 1496
ville, Kentucky 40201



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WILLIAM F. HILDENBRAND
SECRETARY

AUCIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0300

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: May 23, 1984

 CERTIFIED

 REGISTERED

 FEDERAL EXPRESS

 EXPRESS MAIL

84020112358

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED AT THE FEC

RECEIVED.
SENATE OF THE SENATE

84 MAY 1, 8:53

1304 JUN -1 PM 2:58

HAND DELIVERED ☐

May 29, 1984

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

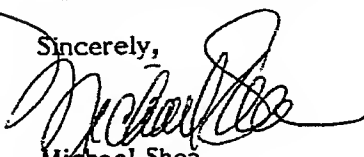
Primary Account:

\$1,000 from the Tennessee Gas Subcommittee of the Tenneco Employees Good Government Fund

General Account:

Our FEC I.D. number is C00155051.

Sincerely,



Michael Shea
Finance Director

McConnell
U.S. Senate

196
Kentucky 40201

84402011314



Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED,
SECRETARY OF THE SENATE
1984 JUN -4 AM 10:47
HAND DELIVERED ☐

May 29, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for the United States Senate, has received the following contributions to the indicated account (primary or general election):

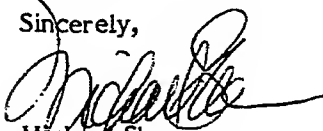
Primary Account:

\$1,000 from the Tennessee Gas Subcommittee of the Tenneco Employees Good Government Fund

General Account:

Our FEC I.D. number is C00155051.

Sincerely,



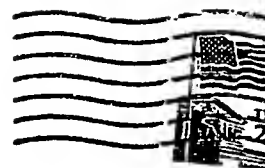
Michael Shea
Finance Director

Mitch
McConnell
U.S. Senate

Box 1496
Louisville, Kentucky 40201

84020113

OPR



ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C.
PHONE: 202-224

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: May 29, 1984

CERTIFIED _____

REGISTERED

FEDERAL EXPRESS

EXPRESS MAIL

8402013191

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE

1984 OCT 26 AM 9:19

HAND DELIVERED ☐

October 22, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

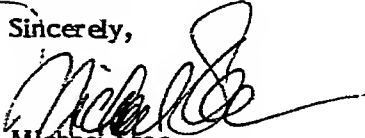
Primary Account:

General Account:

\$1000 each from: Harold K. Phillips, Bonnie Thornton, Cumberland County
Republican Organization

Our FEC I.D. number is C00155051.

Sincerely,



Michael Shea
Finance Director

7

McCConnell
U.S. Senate

1496
Kentucky 40201

840202



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

☐ INSIDE MAIL

Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK Oct. 22, 1984

AND OR DATE OF RECEIPT _____

34020251488

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE
1984 OCT 22 PM 2: 28
HAND DELIVERED ☐

October 19, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

Primary Account:

General Account:

\$1000 each from: Linda Reece, Mabel Barnett, Donald Perkins, William Lockridge, Michael Dicken

Our FEC I.D. number is C00155051.

Sincerely,



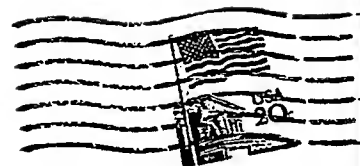
Michael Shea
Finance Director

McCConnell
U.S. Senate

4967
Kentucky 40201

040202330

OK



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

Suite 232
WASHINGTON, D.C. 20510
Phone: 202-224-0322

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

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Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Oct. 19, 1984

AND OR DATE OF RECEIPT

8402023331

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 OCT 25 PM 3:00

HAND DELIVERED ☐

October 23, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):


Primary Account:

General Account:

\$1000 each from: William Yarmuth, Richard M. Scaife, McGraw-Edison PAC

Our FEC LD. number is C00155051.

Sincerely,



Michael Shea
Finance Director

3 4 0 2 0 2 5 1 4 8 9

Connell
U.S. Senate

496
Kentucky 40201

84020251

OPR



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-274-0322

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

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Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Oct. 23, 1984

AND OR DATE OF RECEIPT

844020251491

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED AT THE REC

RECEIVED,
CLERK OF THE SENATE

04 OCT 26 4:48

1984 OCT 26 PM 2:53

HAND DELIVERED ☐

October 23, 1984

Federal Elections Commission
Washington, D.C. 20463

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

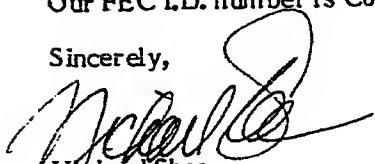
Primary Account:

General Account:

\$1000 each from: William Yarmuth, Richard M. Scaife, McGraw-Edison PAC

Our FEC LD. number is C00155051.

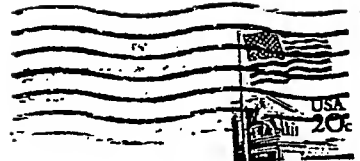
Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

490-17
Kentucky 40201

84020225225



31 OCT 26 A 8:48

THE REC

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0300

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

☐ INSIDE MAIL

Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Oct. 23, 1984

AND OR DATE OF RECEIPT

84020252266

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE

1984 OCT 26 AM 11:16

HAND DELIVERED ☐

October 24, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

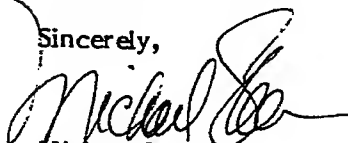
Primary Account:

General Account:

\$1000 each from: J.V. Garner, Julia McConnell, A.M. McConnell, William Baker, Carl Zoeller

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

496
Kentucky 40201

8402022248



OPR

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

HART BUILDING
SUITE 232
WASHINGTON, D.C.
PHONE: 202-224

THE PRECEDING DOCUMENT (S) WAS:

☒ HAND DELIVERED Oct. 24. 1984
Date of Receipt

☐ INSIDE MAIL
Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS
Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION
Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

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☐ POSTMARK ILLEGIBLE

☐ OTHER POSTMARK

AND OR DATE OF RECEIPT

84020252249

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE

1984 OCT 29 PM 3:22

HAND DELIVERED ☐

October 26, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

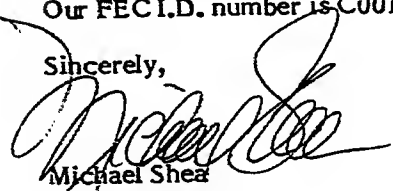
Primary Account:

General Account:

\$1000 each from: A.K. Bunger, George Krauser, Karen Casagrande, James G. Grissom, David Hall, Judy Hall, Will Perry, Motorola PAC, James Patterson III

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

Kentucky 40201

OFF



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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

Suite 232
WASHINGTON, D.C.
Phone: 202-224-2322

THE PRECEDING DOCUMENT (S) WAS:

— HAND DELIVERED

Date of Receipt

— INSIDE MAIL

Date of Receipt

— RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

— RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date Of Receipt

✓ FIRST CLASS MAIL POSTMARKED 10/27/84

— REGISTERED/CERTIFIED MAIL POSTMARK _____

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— POSTMARK ILLEGIBLE

— OTHER _____ POSTMARK _____

— AND OR DATE OF RECEIPT _____

84020252966

10/27/84

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE
1984 OCT 31 AM 9:25
HAND DELIVERED ☐

October 29, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

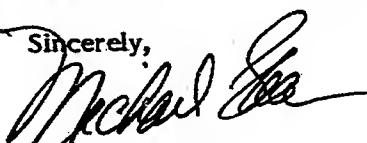
Primary Account:

General Account:

\$1000 each from: Charlotte Collins, Bruce H. Hooper, Martha Fortune, Bellpac, National Screw Machine PAC

Our FEC I.D. number is C00155051.

Sincerely,

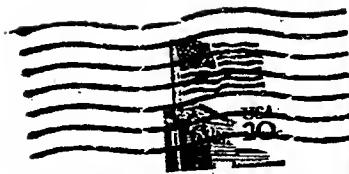


Michael Shea
Finance Director

Connell
U.S. Senate

96
Kentucky 40201

8402025



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

Suite 232
Washington, D.C.
Phone: 202-224

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

Date of Receipt

☐ INSIDE MAIL

Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

Date of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Oct. 29, 1984

AND OR DATE OF RECEIPT

84020253387

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
U.S. SENATE

1984 NOV 5 11 2 13

HARD DELIVERED ☐

November 2, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

Primary Account:

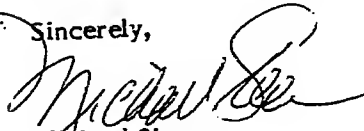
\$1000 from Mary Dudlo

General Account:

\$1000 each from: Bayard Sharp, W.S. Kilroy, Carlton Beal, W.S. Farish, Lewis A. Weil, Mary Dudlo, James Schwartz, J. Larry Nichols, Gordon McCoy, Eugene Rainis, Mrs. Bob Magnus, Bob Magnus, Charles Simas, Kathleen Smith, Wesley Morck, Eldridge Gerry, Harry Pierson, Mamie Williams, Henry Booth, John Hendershot, Jr., W.H. Crain, Kathleen Parriott, H.J. Casey, Frances Taylor, Arthur Musarra, Sarah Korein, Rudolf Wilhelm, Mrs. John Louis, Chet Leonhardt
\$2000 from UPSPAC

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 NOV 5 PM 2 13

HAND DELIVERED ☐

November 2, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

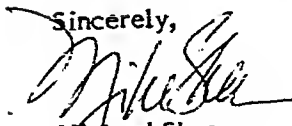
Primary Account:

General Account:

\$1000 each from: Mrs. E.J. Sansome, Jeri Yenawine, Jacque Parsley

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

Kentucky 40201

84020260

OPR



United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

WASHINGTON, D.C.
PHONE: 202-224-2344

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED Date of Receipt

☐ INSIDE MAIL Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER POSTMARK Nov. 2, 1984

AND OR DATE OF RECEIPT

84020460190

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 NOV -5 PM 2:15

HAND DELIVERED ☐

October 31, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

Primary Account:

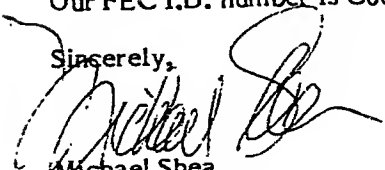
\$1000 from Diane Baron

General Account:

\$1000 each from: Diane Baron, Justine Milliken, Kathleen Ashe, Judith Raese, and
\$5000 from LENPAC

Our FEC I.D. number is C00155051.

Sincerely,


Michael Shea
Finance Director

Connell
U.S. Senate

8402202601
Kentucky 40201

CAF 12



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

WASHINGTON, D.C. 20540
PHONE: 202-224-2800

THE PRECEDING DOCUMENT (S) WAS:

- ☐ HAND DELIVERED _____ Date of Receipt _____
- ☐ INSIDE MAIL _____ Date of Receipt _____
- ☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS _____ Date of Receipt _____
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COMMISSION _____ Date Of Receipt _____
- ☐ FIRST CLASS MAIL POSTMARKED _____
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- ☐ NO POSTMARK _____
- ☐ POSTMARK ILLEGIBLE _____
- ☒ OTHER _____ POSTMARK Oct. 31, 1914
- AND OR DATE OF RECEIPT _____

8402020193

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED.
SECRETARY OF THE SENATE
1984 NOV 13 PM 2:03
HAND DELIVERED ☐

November 6, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

This letter is to notify you of contributions in excess of \$1000 that have been received since our last report.

The McConnell Senate Committee, the duly authorized fundraising committee for Mitch McConnell, candidate for United States Senate from Kentucky, has received the following contributions to the indicated account (primary or general election):

Primary Account:

General Account:

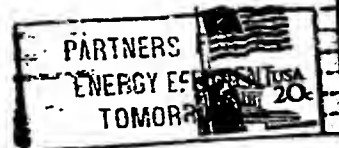
\$1000 from: Ruth Ann Barry; \$2000 from Fund for A Conservative Majority; \$2620 from NCPAC

Our FEC I.D. number is C00155051.

Sincerely,

Michael Shea
Finance Director

909
SENATE COMMITTEE
P. O. BOX 1496
LOUISVILLE KENTUCKY 40221



OPR

UNITED STATES SENATE

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

FD-207-22

THE PRECEDING DOCUMENT (S) WAS:

- ☐ HAND DELIVERED Date of Receipt
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COMMISSION Date Of Receipt
- ☐ FIRST CLASS MAIL POSTMARKED
- ☐ REGISTERED/CERTIFIED MAIL POSTMARK
- ☐ NO POSTMARK
- ☐ POSTMARK ILLEGIBLE
- ☒ OTHER POSTMARK Nov. 8, 1984
- ☐ AND OR DATE OF RECEIPT

84020260910

Mitch
McConnell
U.S. Senate

P.O. Box 1496
Louisville, Kentucky 40201
(502) 459-3134

RECEIVED
SECRETARY OF THE SENATE

1984 APR 30 PM 2:42

HAND DELIVERED ☒

April 26, 1984

Secretary of the Senate
United States Senate
Washington, D.C. 20510

Dear Sir:

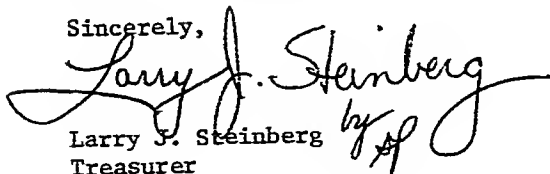
This letter is in reference to the April 15 quarterly report of the:

McConnell Senate Committee
FEC I.D. #C00155051

On page 2, schedule A, Itemized Receipts, the occupation of contributor "C" is listed as "owner", and employer is listed as "Rodes Department Store". That information is erroneous. The correct employer is self-employed, and correct occupation is financial counselor.

Sorry for the error.

Sincerely,


Larry J. Steinberg
Treasurer

LJS:MAS/sep

itch
McConnell
U.S. Senate

Box 1496
Covington, Kentucky 40201



OPR

Secretary of the Senate
United States Senate
Washington, D.C. 20510

840201023

REPORT OF RECEIPTS AND DISBURSEMENTS
For an Authorized Committee

RECEIVED
CLERK OF THE SENATE

(Summary Page)

APR 17 AM 9 26

| | |
|--|--|
| 1. Name of Committee (in Full) McConnell Senate Committee | 2. FEC Identification Number C00155051 |
| Address (Number and Street) P. O. Box 1496 | 3. Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| City, State and ZIP Code <input type="checkbox"/> Check if address is different than previously reported. Louisville, Kentucky 40201 | |

TYPE OF REPORT

4. ☒ April 15 Quarterly Report ☐ Twelfth day report preceding _____ (Type of Election)
☐ July 15 Quarterly Report election on _____ in the State of _____
☐ October 15 Quarterly Report ☐ Thirtieth day report following the General Election
☐ January 31 Year End Report on _____ in the State of _____
☐ July 31 Mid Year Report (Non-election Year Only) ☐ Termination Report

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

| SUMMARY | | Column A This Period | Column B Calendar Year-to-Date |
|--|--|-------------------------|-----------------------------------|
| 5. Covering Period | <u>January 1, 1984</u> Through <u>March 31, 1984</u> | | |
| 6. Net Contributions (other than loans): | | | |
| (a) Total Contributions (other than loans) (from Line 11e) | | \$ 180,880 | \$ 180,880 |
| (b) Total Contribution Refunds (from Line 20d) | | \$ 200 | \$ 200 |
| (c) Net Contributions (other than loans) (Subtract Line 6b from 6a) | | \$ 180,680 | \$ 180,680 |
| 7. Net Operating Expenditures: | | | |
| (a) Total Operating Expenditures (from Line 17) | | \$ 353,338 | \$ 353,338 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | | \$ 12 | \$ 12 |
| (c) Net Operating Expenditures (Subtract Line 7b from 7a) | | \$ 353,326 | \$ 353,326 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | | \$ 221,663 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D) | | \$ | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D) | | \$ 63,018 | |

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:

Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steinberg
Type or Print Name of Treasurer

Larry J. Steinberg
SIGNATURE OF TREASURER

April 13, 1984
Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|

FEC FORM 3 (3/80)

**DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)**

| Name of Committee (in Full) McConnell Senate Committee | | Report Covering the Period: From: 1/1/84 To: 3/31/84 | |
|--|--|---|-----------------------------------|
| | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| I. RECEIPTS | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: | | | |
| (a) Individuals/Persons Other Than Political Committees | | 166,536 | 166,536 |
| (Memo Entry Unitemized \$ 52,843) | | | |
| (b) Political Party Committees | | 951 | 951 |
| (c) Other Political Committees | | 13,393 | 13,393 |
| (d) The Candidate | | | |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11a, 11b, 11c and 11d) | | 180,880 | 180,880 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | |
| 13. LOANS: | | | |
| (a) Made or Guaranteed by the Candidate | | | |
| (b) All Other Loans | | | |
| (c) TOTAL LOANS (add 13a and 13b) | | 12 | 12 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | 3,598 | 3,598 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | 184,490 | 184,490 |
| 16. TOTAL RECEIPTS (Add 11e, 12, 13c, 14 and 15) | | | |
| II. DISBURSEMENTS | | | |
| 17. OPERATING EXPENDITURES | | 353,338 | 353,338 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | |
| 19. LOAN REPAYMENTS: | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | | |
| (b) Of All Other Loans | | | |
| (c) TOTAL LOAN REPAYMENTS (add 19a and 19b) | | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | | |
| (a) Individuals/Persons Other Than Political Committees | | 200 | 200 |
| (b) Political Party Committees | | | |
| (c) Other Political Committees | | 200 | 200 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20a, 20b and 20c) | | | |
| 21. OTHER DISBURSEMENTS | | 353,538 | 353,538 |
| 22. TOTAL DISBURSEMENTS (Add 17, 18, 19c, 20d and 21) | | | |
| III. CASH SUMMARY | | | |
| 23. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD | | \$ | 390,711 |
| 24. TOTAL RECEIPTS THIS PERIOD (From Line 16) | | \$ | 184,490 |
| 25. SUBTOTAL (Add Line 23 and Line 24) | | \$ | 575,201 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) | | \$ | 353,538 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) | | \$ | 221,663 |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications 456 West 43rd Street New York, NY 10036 | 71,341 | | 30,741 | 40,600 |
| Nature of Debt (Purpose): Communications training | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, KY 40299 | | 1,083 | | 1,083 |
| Nature of Debt (Purpose): Printing | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sprint Accounts Receivable Dept. Pittsburgh, PA 15254 | | 810 | | 810 |
| Nature of Debt (Purpose): Long distance telephone charges | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor South Central Bell P. O. Box 32440 Louisville, KY 40232 | | 903 | | 903 |
| Nature of Debt (Purpose): Telephone service | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | 22,272 | | 6,074 | 16,198 |
| Nature of Debt (Purpose): Office rent | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commerical Office Suppliers, Inc. 433 E. Market Street Louisville, KY 40202 | 534 | | 534 | - |
| Nature of Debt (Purpose): Office Supplies | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 59,594 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Odell, Roper & Assoc., Inc. 7316 Wisconsin Ave., Suite 507 Bethesda, MD 20814 | 64,000 | | 64,000 | - |
| Nature of Debt (Purpose): Promotional mailing | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299 | 4,602 | | 1,381 2,233* | 988 |
| * Terminated a lease early. | | | | |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233 | 3,480 | | 1,044 | 2,436 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 3,424 |
| 2) TOTAL This Period (list page this line only) | | | | 63,018 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (list page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (list page only) | | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 26 for
LINE NUMBER 1(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| | | | |
|---|--|---|--|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Ronald LeMaster P.O.Box 425 Southshore, KY 41175 | | Name of Employer Ron LeMaster Insurance, Inc. Occupation Insurance Agent | Date (month, day, year) 01-31-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | Amount of Each Receipt this Period 500.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. C. L. Baird, Sr. 47 Harwood Road Louisville, KY 40222 | | Name of Employer Metal Sales Occupation Businessman | Date (month, day, year) 01-18-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | Amount of Each Receipt This Period 250.00 |
| C. Full Name, Mailing Address and ZIP Code Mrs. Julia S. McConnell 12 Sequoyah Drive Shelbyville, KY 40065 | | Name of Employer self Occupation homemaker | Date (month, day, year) 01-19-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | Amount of Each Receipt This Period 200.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. Robert S. Bishop 410 N. University Blvd. Morehead, KY 40351 | | Name of Employer Self Employed Occupation Retail Drug Business | Date (month, day, year) 03-08-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | Amount of Each Receipt This Period 250.00 |
| E. Full Name, Mailing Address and ZIP Code Mrs. Sara Giles Moore 3671 Tuxedo Road, N.W. Atlanta, GA 30305 | | Name of Employer self Occupation Investments | Date (month, day, year) 01-31-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | Amount of Each Receipt This Period 1000.00 |
| F. Full Name, Mailing Address and ZIP Code Mrs. Emmler A. Neuman, Jr. 825 Walnut Hill Road Lexington, KY 40515 | | Name of Employer self Occupation homemaker | Date (month, day, year) 03-27-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | Amount of Each Receipt This Period 1000.00 |
| G. Full Name, Mailing Address and ZIP Code Mr. Richard D. Cooper Fuller-Fouts Bldg. P. O. Box 1039 Hazard, KY 41707 | | Name of Employer Self Employed Occupation Attorney | Date (month, day, year) 01-25-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ | Amount of Each Receipt This Period 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3700.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 26 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. A. W. Pennington P.O. Box 815 Lexington, KY 40501 | Southern Salads | 03-08-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Sally Q. Eggers 3719 Hillsdale Road Louisville, KY 40222 | Self | 01-27-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Joe M. Rodes 400 Mockingbird Valley Rd Louisville, KY 40207 | Rodes Department Store | 02-07-84 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ | 300.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Daniel P. Garcia 1714 Dundee Way Louisville, KY 40205 | Self | 03-05-84 | 312.50 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ | 312.50 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Mary M. Smock 3510 Hillsboro Road Apartment #2 Nashville, TN 37215 | The Genesis Co., Inc. | 03-22-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation advertising | Aggregate Year-to-Date-\$ | 2000.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Elizabeth W. Hardwick 128 Council Road Louisville, KY 40207 | self | 01-31-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 500.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. John E. Tarrant 3740 Upper River Road Louisville, KY 40207 | Wyatt, Tarrant, and Combs | 03-22-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ | 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3362.50 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 26 for
 LINE NUMBER 1(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Elmer Holliday
 Box 60

Hazard, KY 41701

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Perry Farm Center

Date (month,
 day, year)

03-30-84

Amount of Each
 Receipt this Period

500.00

Occupation

Owner

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Naomi C. Voyles
 2104 Eastern Parkway

Louisville, KY 40204

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

01-27-84

Amount of Each
 Receipt This Period

250.00

Occupation

Housewife

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Fred G. Karem
 2068 Von List Way

Lexington, KY 40502

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Shuffett, Kenton, Curry & Karem

Date (month,
 day, year)

01-26-84

Amount of Each
 Receipt This Period

900.00

Occupation

Attorney

Aggregate Year-to-Date-\$

900.00

D. Full Name, Mailing Address and ZIP Code

Mr. Sigmund Zilber
 1995 NE 142nd Street

North Miami, FL 33181

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Metro Taxi

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

1000.00

Occupation

owner

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. John Alar
 1025 Wellington North

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Brown & Williamson

Date (month,
 day, year)

Tab. Co.
 01-19-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Business Executive

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. John H. Baird
 Middle Bowles Addition
 P. O. Box 351
 Pikeville, KY 41501

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Baird and Baird, P.S.C.

Date (month,
 day, year)

01-05-84

Amount of Each
 Receipt This Period

500.00

Occupation

Attorney

Aggregate Year-to-Date-\$

750.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Julia S. McConnell
 12 Sequoyah Drive

Shelbyville, KY 40065

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

03-29-84

Amount of Each
 Receipt This Period

800.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

4950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 26 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Robert L. Blair 11503 Main Street Middletown, KY 40243 | self | 02-21-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Insurance | Aggregate Year-to-Date-\$ | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Beverly M. Morris 103 Walnut Ave. Paintsville, KY 41240 | self | 02-15-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Coal Producer | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Emler A. Neuman, Jr. 825 Walnut Hill Road Lexington, KY 40515 | self | 03-27-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 2000.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Joseph C. Corradino 1505 Sylvan Court Louisville, KY 40205 | self | 03-30-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Doyleene R. Perry P. O. Box 34153 Houston, TX 77234 | Self | 03-05-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ | 1000.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William W. Fandrich 802 S. 16th St. Murray, KY 42071 | self | 01-09-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation coal operator | Aggregate Year-to-Date-\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Clive Runnells 3900 Essex, Suite 1100 Houston, TX 77027 | self | 03-31-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation investor/rancher | Aggregate Year-to-Date-\$ | 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 6000.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles W. Goering
14 Leathers Rd

Ft. Mitchell, KY 41017

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Erlanger Lumber Company

Date (month,
day, year)

02-29-84

Amount of Each
Receipt this Period

250.00

Occupation

President

Aggregate Year-to-Date-\$ **250.00**

B. Full Name, Mailing Address and ZIP Code

Ms. Mary M. Smock
3510 Hillsboro Road
Apartment #2
Nashville, TN 37215

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Genesis Co., Inc.

Date (month,
day, year)

03-22-84

Amount of Each
Receipt This Period

1000.00

Occupation

advertising

Aggregate Year-to-Date-\$ **2000.00**

C. Full Name, Mailing Address and ZIP Code

Mr. Lawrence Harms
Box 1

Leitchfield, KY 42754

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Newton Stone Company

Date (month,
day, year)

03-02-84

Amount of Each
Receipt This Period

1000.00

Occupation

Vice President

Aggregate Year-to-Date-\$ **1000.00**

D. Full Name, Mailing Address and ZIP Code

Mr. James F. Tate
516 Rolling Lane

Louisville, KY 40207

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Falls City Industries

Date (month,
day, year)

02-10-84

Amount of Each
Receipt This Period

250.00

Occupation

Businessman

Aggregate Year-to-Date-\$ **250.00**

E. Full Name, Mailing Address and ZIP Code

Mr. William Hoskins
2029 Lakeshore

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lexington Building Supply

Date (month,
day, year)

01-31-84

Amount of Each
Receipt This Period

1000.00

Occupation

Owner-Self Employed

Aggregate Year-to-Date-\$ **1000.00**

F. Full Name, Mailing Address and ZIP Code

Mr. Cy Waddle
780 Jarvis Avenue

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Somerset Refining

Date (month,
day, year)

02-13-84

Amount of Each
Receipt This Period

500.00

Occupation

President/Manager

Aggregate Year-to-Date-\$ **500.00**

G. Full Name, Mailing Address and ZIP Code

Mr. Albert P. Keller
800 Bering Drive
#150
Houston, TX 77057

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

A.P. Keller Co.

Date (month,
day, year)

02-22-84

Amount of Each
Receipt This Period

250.00

Occupation

Owner

Aggregate Year-to-Date-\$ **250.00**

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Richard D. Allen
 3112 Arden Road

Louisville, KY 40220

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

01-05-84

Amount of Each
 Receipt this Period

500.00

Occupation

Doctor

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Alfred L. Loomis, Jr.
 Bull Island Plantation

Bluffton, SC 29910

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

01-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Investments

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. John H. Baird
 Middle Bowles Addition ..
 P. O. Box 351
 Pikeville, KY 41501

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Baird and Baird, P.S.C.

Date (month,
 day, year)

02-22-84

Amount of Each
 Receipt This Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 750.00

D. Full Name, Mailing Address and ZIP Code

Mr. Sanford E. McCormick
 1200 Smith Street
 Suite 3600
 Houston, TX 77002

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

McCormick Oil & Gas Corp

Date (month,
 day, year)

03-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

President

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Darrell Brown
 Stonereath Farm
 P.O. Box 610
 Paris, KY 40361

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Stonereath Farm

Date (month,
 day, year)

02-29-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Owner

Aggregate Year-to-Date-\$ 2000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Mary K. Morrison
 2400 Cedar Point Drive

Wayzata, MN 55391

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

01-31-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Investments

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Ms. Janie G. Catron
 110 Padgett Street

Corbin, KY 40701

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Frank H. Catron, P.S.C.

Date (month,
 day, year)

03-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

Registered Nurse

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Larry Noe
 Taylor Co. Courthouse
 PO Box 15 321 E. Broadway
 Campbellsville, KY 42718

Name of Employer

Taylor County

Date (month,
day, year)

03-26-84

Amount of Each
Receipt this Period

400.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Taylor County Attorney

Aggregate Year-to-Date-\$

400.00

B. Full Name, Mailing Address and ZIP Code

Mr. T. H. Corson
 Box 504
 600 Skyview Drive
 Middlebury, IN 46540

Name of Employer

Coachmen Industries, Inc.

Date (month,
day, year)

01-23-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Chairman of the Board

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert J. Perry
 P. O. Box 34153

Name of Employer

self

Date (month,
day, year)

03-05-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

businessman

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Sarah Farish
 P. O. Box 626

Name of Employer

self

Date (month,
day, year)

02-23-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Nancy M. Runnells
 3900 Essex Lane, Suite 1100

Name of Employer

self

Date (month,
day, year)

03-31-84

Amount of Each
Receipt This Period

500.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Helen K. Groves
 Silverbrook Farms

Name of Employer

Silver Brook Farm

Date (month,
day, year)

03-31-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

owner

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. A. Clay Stewart
 1313 Richmond Road

Name of Employer

none

Date (month,
day, year)

03-08-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

retired

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

5150.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Sue Harms
 P. O. Box 1

Name of Employer

self

Date (month,
 day, year)

03-02-84

Amount of Each
 Receipt this Period

1000.00

Leitchfield, KY 42754

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date—\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. W. James Host
 c/o Host & Associates
 120 Kentucky Ave.
 Lexington, KY 40502

Name of Employer

Jim Host & Associates

Date (month,
 day, year)

02-10-84

Amount of Each
 Receipt This Period

500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

executive

Aggregate Year-to-Date—\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Henry C. Wagner
 22 Autumn Hill

Name of Employer

Jewish Hospital

Date (month,
 day, year)

01-06-84

Amount of Each
 Receipt This Period

500.00

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

President

Aggregate Year-to-Date—\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
 15025 Bircham Road

Name of Employer

Copy Corporation

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

350.00

Louisville, KY 40243

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

owner

Aggregate Year-to-Date—\$ 350.00

In-Kind
 Office Equipment

E. Full Name, Mailing Address and ZIP Code

Mr. Robert H. Allen
 Capital Bank Plaza
 333 Clay Street, Suite 4940
 Houston, TX 77002

Name of Employer

self

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

1000.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

investor

Aggregate Year-to-Date—\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Virginia D. Loomis
 Bull Island Plantation

Name of Employer

self

Date (month,
 day, year)

01-06-84

Amount of Each
 Receipt This Period

1000.00

Bluffton, SC 29910

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Investments

Aggregate Year-to-Date—\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Patricia W. Ballard
 2801 Rainbow Drive

Name of Employer

Greenbaum, Doll & McDonald

Date (month,
 day, year)

01-24-84

Amount of Each
 Receipt This Period

500.00

Louisville, KY 40206

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date—\$ 500.00

SUBTOTAL of Receipts This Page (optional) 4850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-----------------------------------|-----------------------------------|------------------------------------|
| Mr. Randal B. McDonald 711 Louisiana, Suite 700 Houston, TX 77002 | Arthur Andersen & Company | 03-05-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation CPA | Aggregate Year-to-Date-\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Darrell Brown Stonereath Farm P.O. Box 610 Paris, KY 40361 | Stonereath Farm | 02-29-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ 2000.00 | |
| C. Full Name, Mailing Address and ZIP Code Ms. Elaine Musselman 6414 Longview Louisville, KY 40207 | Harris & Company | 01-11-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Insurance Executive | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Michael Chambers P.O. Box 3908 Evansville, IN 47737 | General Oilfield Supply | 03-31-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. William M. Noland Route 2 Harrodsburg, KY 40330 | none | 02-17-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Ray C. Dauenhauer, Jr. 1519 Sylvan Way Louisville, KY 40205 | Dauenhauer Plumbing & Heating Co | 02-22-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Contractor | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Robert H. Pines 24 Central Park South New York, NY 10019 | The R. H. Pines Corporation | 01-31-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4000.00 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED RECEIPTS

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|---|------------------------------------|-----------------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. W. S. Farish P. O. Box 626 Versailles, KY 40383 | self | 02-23-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Lane's End Farm | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. David V. Hall 618 Hatherleigh Lane Louisville, KY 40222 | Cardinal Medical Corp. | 01-25-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Businessman | Aggregate Year-to-Date-\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles E. Stoll 527 Club Ln. Louisville, KY 40207 | none | 02-03-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Alvin Haynes P. O. Box 1635 Lexington, KY 40592 | Alvin Haynes Trucking | 03-28-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation owner | Aggregate Year-to-Date-\$ 2000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Don Thompson Box 166 Henderson, KY 42420 | Thompson, Bitt Service, Inc. | 03-26-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ 2000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Roy M. Huffington 307 Shadywood Houston, TX 77057 | Roy M. Huffington, Inc. | 03-06-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Int. Petroleum Oper. | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Edward B. Weinberg 5018 Dunvegan Road Louisville, KY 40222 | Greenebaum, Doll & McDonald | 03-16-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date-\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 5750.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

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|---|---|--------------------------------------|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. William Kirkland 1203 Pradero Box 256 Frankfort, KY 40601 | Name of Employer Self | Date (month, day, year) 03-06-84 | Amount of Each Receipt this Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Sidney J. Anderson 915 Col. Anderson Pkwy. Louisville, KY 40223 | Name of Employer self | Date (month, day, year) 02-07-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homebuilder | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Harry Lucas, Jr. P. O. Box 56467 Houston, TX 77256 | Name of Employer self | Date (month, day, year) 03-15-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation investments | Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Charles T. Barlow, Sr. P.O. Box 32038 Louisville, KY 40232 | Name of Employer Chase Barlow Lumber Co. | Date (month, day, year) 02-10-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Lumber Co. Executive | Aggregate Year-to-Date-\$ 300.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. John R. McGinnis P. O. Box 347 Greenup, KY 41144 | Name of Employer McBrayer, McGinnis & Leslie | Date (month, day, year) 01-31-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Lendy F. Brown Stonereath Farm P.O. Box 610 Paris, KY 40361 | Name of Employer Stonereath Farm | Date (month, day, year) 02-29-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ 2000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Edith Napier 350 Ky Blvd. Hazard, KY 41701 | Name of Employer none | Date (month, day, year) 03-30-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 1500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4550.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|---|---|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Nonnie J. Chism 510 Altagate Road Louisville, KY 40206 | Name of Employer Self | Date (month, day, year) 01-24-84 | Amount of Each Receipt this Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Lawrence E. O'Connell 9013 Split Rail Drive Louisville, KY 40214 | Name of Employer TFC, Inc. | Date (month, day, year) 02-10-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. David L. Daugherty 1209 Wellington Place, North Louisville, KY 40207 | Name of Employer Daugherty & Trautwein, Inc. | Date (month, day, year) 02-13-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Professional Engineer | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Dr. Clinton R. Potts 7811 Wolf Pen Branch Road Prospect, KY 40059 | Name of Employer Self Employed | Date (month, day, year) 03-22-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ 300.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Jerry E. Finger Charter Bancshares P. O. Box 10816 Houston, TX 77018 | Name of Employer Charter Bank-Houston, TX | Date (month, day, year) 03-31-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairm of the Board | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Thomas R. Sanders Box 401 Murray, KY 42071 | Name of Employer self | Date (month, day, year) 03-26-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Developer | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Judy Hall 618 Hatherleigh Lane Louisville, KY 40222 | Name of Employer self | Date (month, day, year) 01-25-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4300.00 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED RECEIPTS

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|---|---|---|--|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. W. Clement Stone 222 W. Adams Chicago, IL 60606 | Name of Employer Combined Int. Corp. | Date (month, day, year) 03-06-84 | Amount of Each Receipt this Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman | Aggregate Year-to-Date—\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Alvin Haynes P. O. Box 1635 Lexington, KY 40592 | Name of Employer Alvin Haynes Trucking | Date (month, day, year) 03-28-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation owner | Aggregate Year-to-Date—\$ 2000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Don Thompson Box 166 Henderson, KY 42420 | Name of Employer Thompson, Bitt Service, Inc. | Date (month, day, year) 03-26-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date—\$ 2000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201 | Name of Employer Hunt Energy | Date (month, day, year) 02-22-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date—\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Martin S. Weinberg 5011 Cliffwood Road Louisville, KY 40222 | Name of Employer Greenebaum, Doll & McDonald | Date (month, day, year) 03-16-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. R. Keller Kitchen 2103 Twin Hill Road Louisville, KY 40207 | Name of Employer KY Machinery | Date (month, day, year) 01-05-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Jane Norton Barrett 8221 Wolf Pen Branch Road Prospect, KY 40059 | Name of Employer self | Date (month, day, year) 01-25-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife/Mother | Aggregate Year-to-Date—\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 6250.00 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles T. Melvin
555 North Court Street

Paintsville, KY 41240

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

I.G.A. Store

Date (month,
day, year)

02-22-84

Amount of Each
Receipt this Period

500.00

Occupation
owner

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Lendy F. Brown
Stonereath Farm
P.O. Box 610

Paris, KY 40361

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Stonereath Farm

Date (month,
day, year)

02-29-84

Amount of Each
Receipt This Period

1000.00

Occupation
Owner

Aggregate Year-to-Date-\$ 2000.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Edith Napier
350 Ky Blvd.

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

03-30-84

Amount of Each
Receipt This Period

500.00

Occupation
retired

Aggregate Year-to-Date-\$ 1500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Jess G. Oakley, Jr.
10302 Foxboro Drive

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
day, year)

03-22-84

Amount of Each
Receipt This Period

400.00

Occupation

Housing Consultant

Aggregate Year-to-Date-\$ 400.00

E. Full Name, Mailing Address and ZIP Code

Mr. H. Lyle Duerson, Jr.
400 Pleasantview Avenue

Louisville, KY 40206

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Southern Optical

Date (month,
day, year)

01-25-84

Amount of Each
Receipt This Period

500.00

Occupation

President/Optician

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Jeannette Priebe
1001 S. Buckeye Lane

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jefferson Cnty. Govt.

Date (month,
day, year)

03-20-84

Amount of Each
Receipt This Period

500.00

Occupation

Personnel Director

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Michael M. Fleishman
4107 Woodstone Way

Louisville, KY 40222

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Greenebaum, Doll & McDonald

Date (month,
day, year)

03-16-84

Amount of Each
Receipt This Period

500.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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| | | | |
|---|--|---|--|
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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Drura Scott Box 7 Henderson, KY 42420 | Name of Employer Scott Lumber | Date (month, day, year) 03-26-84 | Amount of Each Receipt this Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date—\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Orville L. Hamilton Thelma, KY 41260 | Name of Employer self | Date (month, day, year) 02-22-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Coal Operator | Aggregate Year-to-Date—\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mrs. W. Clement Stone 222 W. Adams Chicago, IL 60606 | Name of Employer self | Date (month, day, year) 03-06-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Ms. Louise F. Hickox 6411 Wolf Pen Branch Road Harrods Creek, KY 40027 | Name of Employer none | Date (month, day, year) 03-30-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation none | Aggregate Year-to-Date—\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Dr. Raymond J. Timmerman 51 Barrett Drive Fort Thomas, KY 41075 | Name of Employer Self Employed | Date (month, day, year) 03-23-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | Aggregate Year-to-Date—\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. W. Herbert Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201 | Name of Employer Hunt Energy | Date (month, day, year) 02-22-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date—\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Beverly White P. O. Box 578 Winchester, KY 40391 | Name of Employer White, McCann & Stewart | Date (month, day, year) 03-16-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date—\$ 530.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 5500.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mrs. Sallie Ann Koch 3012 Beals Branch Drive Louisville, KY 40206 | self | 03-28-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 500.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Don Mahurin P.O. Box 436 2746 Highway 41 North Henderson, KY 42420 | self | 03-30-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Auto Dealer | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Donald C. Barton 1014 Circle Drive Corbin, KY 40701 | Self | 03-19-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | Aggregate Year-to-Date-\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Dorothy H. Middleton 163 Arrowhead Road Louisville, KY 40207 | self | 01-27-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Owsley Brown, II Poplar Terrace 6501 Longview Lane Louisville, KY 40222 | Brown-Forman Distillers Corp. | 03-14-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Senior Vice President | Aggregate Year-to-Date-\$ | 1000.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Charles D. Clark 307 S. 8th Street Murray, KY 42071 | self | 03-31-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | Aggregate Year-to-Date-\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles A. Osborn, Jr. 1230 Liberty Bank Lane Louisville, KY 40222 | Osborn Enterprises | 01-18-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Developer | Aggregate Year-to-Date-\$ | 2000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 5500.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|--|--------------------------------------|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Jack Dulworth 9143 Briar Forest Houston, TX 77024 | Name of Employer Dulworth & Company | Date (month, day, year) 03-05-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Life Insurance Consultant | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Victor L. Priebe 1001 South Buckeye Lane Prospect, KY 40059 | Name of Employer Action Now, Inc. | Date (month, day, year) 03-20-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive Director | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Duffy L. Ford 200 South Second Street #167 Richmond, KY 40475 | Name of Employer Amick & Helm | Date (month, day, year) 01-23-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation C P A | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Phillip D. Scott 763 Lakeshore Drive Lexington, KY 40502 | Name of Employer Greenbaum, Dall & McDonald | Date (month, day, year) 03-16-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. A. B. Hancock, Jr. Claiborne House Paris, KY 40361 | Name of Employer self | Date (month, day, year) 02-29-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Bonnie N. Sturgeon 902 Rugby Place Louisville, KY 40222 | Name of Employer self | Date (month, day, year) 03-31-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 2000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. James D. Hill 832 Kentucky Blvd. Hazard, KY 41701 | Name of Employer Perry Oil Co., Inc. | Date (month, day, year) 03-30-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4750.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|---|-------------------------------------|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Dr. Stanley E. Todd, Sr. 304 Barnes Mill Road Richmond, KY 40475 | Name of Employer Medical Arts Bldg. Occupation D.M.D. | Date (month, day, year) 03-09-84 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Beverly White P. O. Box 578 Winchester, KY 40391 | Name of Employer White, McCann & Stewart Occupation Attorney | Date (month, day, year) 03-26-84 | Amount of Each Receipt This Period 30.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 530.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Jay D. Koontz 3000 West Mt. Zion Road, P. O. Box 473 Crestwood, KY 40014 | Name of Employer Gene Snyder Occupation Assistant to U.S. Rep. | Date (month, day, year) 01-31-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 1000.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mr. Russell Badgett, Jr. Twin Oaks Madisonville, KY 42431 | Name of Employer self Occupation Mining Engineer | Date (month, day, year) 03-08-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 400.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mr. James L. Marvin 13 South Tejon, Suite 202 Colorado Springs, CO 80903 | Name of Employer self Occupation restaurants & investments | Date (month, day, year) 03-31-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 1000.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Robert J. Begley Hickory Hill Richmond, KY 40475 | Name of Employer Begely Drugs Occupation Owner, Drug Co. | Date (month, day, year) 03-01-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 250.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Gary L. Miller Route 1, Box 221 Flatwoods, KY 41139 | Name of Employer Greenup County Bank Occupation Banker | Date (month, day, year) 02-01-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 3480.00 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. I. H. Buchanan, Jr.
 151 Parkway

Hazard, KY 41701

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Hazard Airport

Date (month,
day, year)

03-30-84

Amount of Each
Receipt this Period

500.00

Occupation
owner

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Dr. Garry W. Neltner, D.P.M.
 3117 Hudnall Avenue

Covington, KY 41017

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

02-22-84

Amount of Each
Receipt This Period

50.00

Occupation
Physician

Aggregate Year-to-Date-\$ 1050.00

C. Full Name, Mailing Address and ZIP Code

Dr. Randall Clark
 102 S. Maplewood

Somerset, KY 42501

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Randall Clark, M.D., F.A.C.S.

Date (month,
day, year)

02-15-84

Amount of Each
Receipt This Period

500.00

Occupation
Doctor

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Charles A. Osborn, Jr.
 1230 Liberty Bank Lane

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Osborn Enterprises

Date (month,
day, year)

01-18-84

Amount of Each
Receipt This Period

1000.00

Occupation
Developer

Aggregate Year-to-Date-\$ 2000.00

E. Full Name, Mailing Address and ZIP Code

Dr. Victor Duvall
 Anneta Rte.

Leitchfield, KY 42754

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Clarkson Clinic

Date (month,
day, year)

03-06-84

Amount of Each
Receipt This Period

100.00

Occupation
M.D.

Aggregate Year-to-Date-\$ 300.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Newell D. Fox
 8800 Denington Drive

Louisville, KY 40222

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

01-25-84

Amount of Each
Receipt This Period

500.00

Occupation
homemaker

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Ronda M. Scott
 763 Lakeshore Drive

Lexington, KY 40502

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

03-16-84

Amount of Each
Receipt This Period

1000.00

Occupation
homemaker

Aggregate Year-to-Date-\$ 1000.00

SUBTOTAL of Receipts This Page (optional)

3650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 20 of 26 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|----------------------------|-----------------------------------|------------------------------------|
| Ms. Clay Hancock Claiborne Farm Paris, KY 40361 | Claiborne Farm | 02-03-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Director | Aggregate Year-to-Date-\$ 2000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Bonnie N. Sturgeon 902 Rugby Place Louisville, KY 40222 | self | 03-31-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 2000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. James Martin Hill, Jr. 3244 Huntingdon Houston, TX 77091 | Hill & White Apt. Builders | 02-22-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Kenneth W. Towery 908 Rugby Place Louisville, KY 40222 | Ken Towery Firestone | 02-06-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Alpha Hutchinson 235 Knapp Avenue Morehead, KY 40351 | Citizens Bank | 03-08-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Paul E. Yarbrough, Jr. 1202 Cantererry Court Arlington, TX 76013 | self | 03-06-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Investor | Aggregate Year-to-Date-\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Nancy B. Kriebel P.O. Box 394 Old Lyme, CT 06371 | self | 03-06-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Investments | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 5250.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 21 of 26 for
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Russell Badgett, Jr.
Twin Oaks

Name of Employer

self

Date (month,
day, year)

03-30-84

Amount of Each
Receipt This Period

200.00

Madisonville, KY 42431

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Mining Engineer

Aggregate Year-to-Date-\$

400.00

B. Full Name, Mailing Address and ZIP Code

Dr. E. Truman Mays
801 Leaf Lane

Name of Employer

Self

Date (month,
day, year)

02-13-84

Amount of Each
Receipt This Period

500.00

Somerset, KY 42501

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Surgeon

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Clay M. Bishop, Jr.
101 Walters Street
P. O. Box 468
Manchester, KY 40962

Name of Employer

self

Date (month,
day, year)

03-30-84

Amount of Each
Receipt This Period

900.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Lincoln Miller
8520 Preston Highway

Name of Employer

self

Date (month,
day, year)

01-24-84

Amount of Each
Receipt This Period

500.00

Louisville, KY 40219

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Insurance

Aggregate Year-to-Date-\$

500.00

E. Full Name, Mailing Address and ZIP Code

Mr. George A. Bush, Jr.
514 Tiffany Ln.

Name of Employer

Harry K. Moore & Son

Date (month,
day, year)

02-06-84

Amount of Each
Receipt This Period

250.00

Louisville, KY 40207

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Real Estate

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Dr. Garry W. Neltner, D.P.M.
3117 Hudnall Avenue

Name of Employer

Self

Date (month,
day, year)

03-07-84

Amount of Each
Receipt This Period

50.00

Covington, KY 41017

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Physician

Aggregate Year-to-Date-\$

1050.00

G. Full Name, Mailing Address and ZIP Code

Ms. Nancye M. Combs
701 Waterford Rd.

Name of Employer

Human Resources/Druthers

Date (month,
day, year)

03-02-84

Amount of Each
Receipt This Period

250.00

Louisville, KY 40207

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Executive Vice President

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 22 of 26 for
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(Use separate schedule(s) for each
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|---|------------------------------|-----------------------------------|------------------------------------|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Doctor Harold Parham 3946 McGirts Boulevard Jacksonville, FL 32210 | Self Employed | 01-31-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Victor Duvall Anneta Rte. Leitchfield, KY 42754 | Clarkson Clinic | 03-12-84 | 200.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation M.D. | Aggregate Year-to-Date-\$ 300.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. John H. Rasnick P. O. Box 933 Pikeville, KY 41501 | Summitt Engineering | 02-27-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Weldon Shouse 2033 Lakeside Drive Lexington, KY 40502 | self | 03-14-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Clay Hancock Claiborne Farm Paris, KY 40361 | Claiborne Farm | 02-03-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Director | Aggregate Year-to-Date-\$ 2000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Andrew H. Susemichel 2420 Frankfort Avenue Louisville, KY 40206 | Susemichel Engineering, Inc. | 01-19-84 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ 300.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Henning Hilliard 4506 Upper River Road Louisville, KY 40222 | Self Employed | 02-22-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Stock Broker | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3750.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 23 of 26 for
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 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-----------------------------------|-------------------------|------------------------------------|
| Mr. Kenneth J. Tuggle 3715 Lime Kiln Lane Louisville, KY 40222 | Brown, Todd & Heyburn Attorney | 02-06-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | 500.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Ina Brown Johnson 14 River Hill Road Louisville, KY 40207 | Self Homemaker | 02-02-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Byron Young 2040 Von List Way Lexington, KY 40502 | Self Employed Physician | 02-13-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | 500.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert H. Kriebel P. O. Box 394 Old Lyme, CT 06371 | Loctite Corporation Chairman | 03-06-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. C. L. Baird, Jr. 770 Greenridge Lane Louisville, KY 40207 | self attorney | 01-18-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Addison M. McConnell, Sr. 12 Sequoyah Dr. Shelbyville, KY 40065 | none Retired | 01-19-84 | 800.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | 800.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Clay M. Bishop, Jr. 101 Walters Street P. O. Box 468 Manchester, KY 40962 | self Attorney | 03-30-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3650.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|-------------------------|------------------------------------|
| Mrs. Emma R. Butler c/o Butler Construction Co. 2221 Buechel Avenue Louisville, KY 40218 | homemaker | 03-09-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 250.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Garry W. Neltner, D.P.M. 3117 Hudnall Avenue Covington, KY 41017 | Self | 03-07-84 | 950.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician Aggregate Year-to-Date-\$ | 1050.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Kimberly G. Cook 708 Culbertson Avenue New Albany, IN 47150 | Louisville Auto Auction | 01-24-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation businesswoman Aggregate Year-to-Date-\$ | 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. G. N. Parrott 4900 Seneca Dallas, TX 75209 | Parrott Oil Company | 03-31-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President Aggregate Year-to-Date-\$ | 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Ernest A. Eggers 3719 Hillside Road Louisville, KY 40222 | Self | 01-27-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician Aggregate Year-to-Date-\$ | 500.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Katie Reece 304 Bridge St. Manchester, KY 40962 | self | 03-31-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker Aggregate Year-to-Date-\$ | 250.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Lars Frey 5843 Brittany Woods Cr. Louisville, KY 40222 | Thomas Industries | 02-13-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive Aggregate Year-to-Date-\$ | 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4450.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|--|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Arthur K. Smith 1010 Alta Circle Road Louisville, KY 40205 | Smith Furniture | 03-19-84 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | 300.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Thomas V. Handy 105 E. 4th Street London, KY 40741 | self | 03-30-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Paul Tafel, Jr. 506 Country Lane Louisville, KY 40207 | none | 02-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ | 250.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Anne Hoke 1114 County Cork Drive Murray, KY 42071 | self | 02-14-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | Aggregate Year-to-Date-\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. James R. Voyles 2104 Eastern Pkwy. Louisville, KY 40204 | Self | 01-27-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ | 250.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles Jordan, Jr. P.O. Box 187 Vanceburg, KY 41179 | First National Bank of Lewis Cty | 01-31-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Bank President | Aggregate Year-to-Date-\$ | 500.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Marvin C. Zeid P. O. Box 52486 Houston, TX 77052 | Self | 03-05-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Independent Oil Operator | Aggregate Year-to-Date-\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3800.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 26 of 26 for
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. R. Bruce LaBoon
 3400 Texas Commerce Tower

Houston, TX 77002

Name of Employer

Liddell, Sapp, Zivley, Brown & LaBoon

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

1000.00

Occupation

lawyer

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date--\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date--\$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date--\$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date--\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date--\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date--\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date--\$

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

113692.50

84020090317

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 11(b)
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Logan County Republican Party
 811 Crittenden Circle

Russellville, KY 42276

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-21-84

Amount of Each
 Receipt this Period

253.00

Aggregate Year-to-Date-\$

253.00

B. Full Name, Mailing Address and ZIP Code

The National Congressional Club
 P. O. Box 18848

Raleigh, NC 27619

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-31-84

Amount of Each
 Receipt This Period

473.45

Aggregate Year-to-Date-\$

473.45

In-Kind
 Mailing List - Names

C. Full Name, Mailing Address and ZIP Code

S. W. Republican Women's Club
 10210 Starlight Way

Louisville, KY 40272

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

02-15-84

Amount of Each
 Receipt This Period

50.00

Aggregate Year-to-Date-\$

50.00

D. Full Name, Mailing Address and ZIP Code

Lyon Co. Republican Women's Club
 Route 1
 Box 171
 Eddyville, KY 42038

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-12-84

Amount of Each
 Receipt This Period

50.00

Aggregate Year-to-Date-\$

50.00

E. Full Name, Mailing Address and ZIP Code

Franklin Co. Rep. Women's Club
 508 Pawnee

Frankfort, KY 40601

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

02-16-84

Amount of Each
 Receipt This Period

25.00

Aggregate Year-to-Date-\$

25.00

F. Full Name, Mailing Address and ZIP Code

Monroe Co. Rep. Women's Club
 704 W. 4th Street

Tompkinsville, KY 42167

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
 day, year)

03-02-84

Amount of Each
 Receipt This Period

100.00

Aggregate Year-to-Date-\$

100.00

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

951.45

TOTAL This Period (last page this line number only)

951.45

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 2 for
 LINE NUMBER 1 (c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|------------------|-----------------------------------|------------------------------------|
| Campaign America 919 Prince Street Alexandria, VA 22314 | | 02-13-84 | 2500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ 2500.00 | |
| B. Full Name, Mailing Address and ZIP Code Campaign For Prosperity 1708 New Hampshire Avenue, N.W. Washington, DC 20009 | | 03-28-84 | 2500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ 2500.00 | |
| C. Full Name, Mailing Address and ZIP Code Assoc. Builders & Contractors PAC 1806 South Third Street Louisville, KY 40208 | | 03-14-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code Citizens for the Republic 1253 -7th Street Suite 200 Santa Monica, CA 90401 | | 03-26-84 | 2500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ 2500.00 | |
| E. Full Name, Mailing Address and ZIP Code BI PAR PAC P. O. Box 278 Henderson, KY 42420 | | 03-31-84 | 1392.70 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ 1392.70 | |
| F. Full Name, Mailing Address and ZIP Code Nat. Restaurant Assoc. PAC 311 First Street N.W. Washington, DC 20001 | | 03-09-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201 | | 02-22-84 | 3000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ 3000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 12892.70 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 2 for
LINE NUMBER 1 (C)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Print PAC
 1730 North Lynn Street**

Arlington, VA 22209

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt this Period

02-23-84

500.00

Occupation

Aggregate Year-to-Date—\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

13392.70

84002090120

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Liberty National Bank
416 West Jefferson Street
Louisville, KY 40202

Name of Employer

Date (month,
 day, year)
Monthly,
January -
March

Amount of Each
 Receipt This Period

3,178

Receipt For: ☐ Primary ☐ General
☒ Other (specify): Interest on investment

Occupation

Aggregate Year-to-Date—\$ 3,178

B. Full Name, Mailing Address and ZIP Code

Bank of Louisville
500 West Broadway
Louisville, KY 40202

Name of Employer

Date (month,
 day, year)
Monthly,
January -
March

Amount of Each
 Receipt This Period

420

Receipt For: ☐ Primary ☐ General
☒ Other (specify): Interest on investment

Occupation

Aggregate Year-to-Date—\$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

3,598

TOTAL This Period (last page this line number only)

3,598

84020090121

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
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 Summary Page)

Line: 17

Page 1 of 16

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|---|--|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code McConnell Senate Committee Odell, Roper & Associates, Inc. 7316 Wisconsin Ave. Bethesda, MD 20814 | Purpose of Disbursement Direct Mail Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-09-84 | Amount of Each Disbursement This Period 1500.00 |
| B. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-18-84 | Amount of Each Disbursement This Period 191.63 |
| C. Full Name, Mailing Address and ZIP Code Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233 | Purpose of Disbursement Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-24-84 | Amount of Each Disbursement This Period 347.97 |
| D. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-28-84 | Amount of Each Disbursement This Period 434.15 |
| E. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Purpose of Disbursement Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-09-84 | Amount of Each Disbursement This Period 2024.69 |
| F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-20-84 | Amount of Each Disbursement This Period 131.55 |
| G. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-31-84 | Amount of Each Disbursement This Period 446.24 |
| H. Full Name, Mailing Address and ZIP Code Sam Swope Pontiac, Inc. 4311 Shelbyville Road Louisville, KY 40207 | Purpose of Disbursement Car Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-18-84 | Amount of Each Disbursement This Period 350.00 |
| I. Full Name, Mailing Address and ZIP Code Internal Revenue Service Internal Revenue Service Center Memphis, TN 37501 | Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-14-84 | Amount of Each Disbursement This Period 2486.23 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7912.46 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS
Line: 17
 Page 2 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| | | | |
|--|--|-------------------------------------|---|
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-27-84 | Amount of Each Disbursement This Period 100.00 |
| B. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-14-84 | Amount of Each Disbursement This Period 208.70 |
| C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-19-84 | Amount of Each Disbursement This Period 500.00 |
| D. Full Name, Mailing Address and ZIP Code Mason-Dixon Business Forms, Inc. 431 South Broadway Lexington, KY 40508 | Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-04-84 | Amount of Each Disbursement This Period 58.33 |
| E. Full Name, Mailing Address and ZIP Code Art Craft Press 480 Fairman Road Lexington, KY 40511 | Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-19-84 | Amount of Each Disbursement This Period 171.62 |
| F. Full Name, Mailing Address and ZIP Code Odell, Roper & Associates, Inc. 7316 Wisconsin Ave. Bethesda, MD 20814 | Purpose of Disbursement Direct Mail Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-19-84 | Amount of Each Disbursement This Period 24386.30 |
| G. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Purpose of Disbursement Media Production Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-09-84 | Amount of Each Disbursement This Period 19140.86 |
| H. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Purpose of Disbursement Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-13-84 | Amount of Each Disbursement This Period 58000.00 |
| I. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-13-84 | Amount of Each Disbursement This Period 434.15 |
| SUBTOTAL of Disbursements This Page (optional) | | | 102999.96 |
| TOTAL This Period (last page this line number only) | | | |

 3
2
3
0
9
0
1
1
2
0
4
8

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

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 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Rent | 02-02-84 | 2024.69 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Travel Reimbursement | 02-02-84 | 168.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Telephone expenses | 01-09-84 | 517.58 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218 | Printing | 03-18-84 | 40.79 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary | 02-14-84 | 446.24 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194 | Delivery Charges | 01-09-84 | 29.25 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Sam Swope Pontiac, Inc. 4311 Shelbyville Road Louisville, KY 40207 | Car Rental | 03-24-84 | 63.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Internal Revenue Service Internal Revenue Service Center Memphis, TN 37501 | Payroll Taxes | 03-12-84 | 13.84 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| U.S. Postmaster Louisville, KY 40201 | Postage | 02-02-84 | 75.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3378.39 |
| TOTAL This Period (last page this line number only) | | | |

84020090324

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

 Page 4 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
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 Summary Page)

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 Name of Committee (in Full)
 McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-28-84 | 390.76 |
| B. Full Name, Mailing Address and ZIP Code Mason-Dixon Business Forms, Inc. 431 South Broadway Lexington, KY 40508 | Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 178.18 |
| C. Full Name, Mailing Address and ZIP Code Madisonville Country Club Earlington Park Madisonville, KY 42431 | Reception Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-13-84 | 538.59 |
| D. Full Name, Mailing Address and ZIP Code Art Craft Press 480 Fairman Road Lexington, KY 40511 | Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-24-84 | 255.15 |
| E. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-09-84 | 520.85 |
| F. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 5800.00 |
| G. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-20-84 | 60000.00 |
| H. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-29-84 | 434.15 |
| I. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-12-84 | 2024.69 |
| SUBTOTAL of Disbursements This Page (optional) | | | 70142.37 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 6 of 16 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Line: 17

Page 6 of 16

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|---|-------------------------|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-31-84 | 1061.69 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| AT&T Information Systems 9000 Shelbyville Road Louisville, KY 40222 | Telephone Expenses XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-04-84 | 443.20 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-08-84 | 305.76 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-05-84 | 5800.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-27-84 | 59520.03 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-04-84 | 534.40 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Pitney Bowes P.O. Box 38390 Louisville, KY 40233 | Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-04-84 | 358.76 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 819.20 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Telephone Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-04-84 | 307.33 |
| SUBTOTAL of Disbursements This Page (optional) | | | 69150.37 |
| TOTAL This Period (last page this line number only) | | | |

84020090127

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 (Use separate schedule(s) for each
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)
McConnell Senate Committee

| | | | |
|---|--|-------------------------------------|--|
| A. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. <u>Louisville, KY 40220</u> | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-13-84 | Amount of Each Disbursement This Period 449.88 |
| B. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A <u>Memphis, TN 38194</u> | Purpose of Disbursement Delivery Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-12-84 | Amount of Each Disbursement This Period 112.00 |
| C. Full Name, Mailing Address and ZIP Code State Farm Insurance 760 N.W. Broad Street <u>Murfreesboro, TN 37131</u> | Purpose of Disbursement Insurance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-10-84 | Amount of Each Disbursement This Period 151.20 |
| D. Full Name, Mailing Address and ZIP Code Internal Revenue Service Internal Revenue Service Center <u>Memphis, TN 37501</u> | Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-13-84 | Amount of Each Disbursement This Period 2755.62 |
| E. Full Name, Mailing Address and ZIP Code U.S. Postmaster <u>Louisville, KY 40201</u> | Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-09-84 | Amount of Each Disbursement This Period 200.00 |
| F. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road <u>Louisville, KY 40205</u> | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-29-84 | Amount of Each Disbursement This Period 390.76 |
| G. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. <u>Louisville, KY 40204</u> | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-13-84 | Amount of Each Disbursement This Period 1061.69 |
| H. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 <u>Louisville, KY 40222</u> | Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-19-84 | Amount of Each Disbursement This Period 168.00 |
| I. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. <u>Louisville, KY 40222</u> | Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-21-84 | Amount of Each Disbursement This Period 282.77 |
| SUBTOTAL of Disbursements This Page (optional) | | | 5571.92 |
| TOTAL This Period (last page this line number only) | | | |

84020090128

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 LINE NUMBER 17
 (Use separate schedule(s) for each
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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|--|-------------------------|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-13-84 | 498.51 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 92.17 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Pitney Bowes P.O. Box 38390 Louisville, KY 40233 | Office Equipment and Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-24-84 | 1725.44 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-28-84 | 345.09 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 2315.31 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-29-84 | 449.88 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Airplane Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 1165.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-09-84 | 200.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Xerox 1250 Fairwood Ave. Columbus, OH 43267 | Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 337.47 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7128.87 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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 (Use separate schedule(s) for each
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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|---|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-14-84 | 1061.69 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Richard Nugent 7200 Highway 524 Westport, KY 40077 | Photography Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-18-84 | 397.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| 9300 Shelbyville Road AT&T Information Systems 9300 Shelbyville Rd Louisville, KY 40222 | Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 2-19-84 | 893.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-09-84 | 145.35 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-31-84 | 498.51 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-18-84 | 858.52 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-13-84 | 345.09 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Telephone Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-12-84 | 2045.47 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-13-84 | 581.86 |
| SUBTOTAL of Disbursements This Page (optional) | | | 6826.49 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

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Page 10 of 16 for
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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ms. Mary Jane Geis
 602 Wallace Ave.

Purpose of Disbursement

Salary

Date (month,
day, year)Amount of Each
Disbursement This Period

01-31-84

275.38

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40207

B. Full Name, Mailing Address and ZIP Code

K. S. Air, Inc.
 4510 Mt. Vernon Road

Purpose of Disbursement

Airplane Rental

Date (month,
day, year)Amount of Each
Disbursement This Period

03-18-84

1587.00

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40220

C. Full Name, Mailing Address and ZIP Code

U.S. Postmaster

Purpose of Disbursement

Postage

Date (month,
day, year)Amount of Each
Disbursement This Period

02-14-84

500.00

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40201

D. Full Name, Mailing Address and ZIP Code

Ms. Janet Mullins.
 1249 Everett Ave.

Purpose of Disbursement

Salary

Date (month,
day, year)Amount of Each
Disbursement This Period

02-28-84

1061.69

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40204

E. Full Name, Mailing Address and ZIP Code

AT&T Information Systems
 9300 Shelbyville Road
 Suite 300

Purpose of Disbursement

Telephone Expenses

Date (month,
day, year)Amount of Each
Disbursement This Period

03-12-84

649.13

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40222

F. Full Name, Mailing Address and ZIP Code

Mr. Bill Oakley
 Apt. 16, Vieux Carre Apts.

Purpose of Disbursement

Travel Reimbursement

Date (month,
day, year)Amount of Each
Disbursement This Period

03-16-84

273.56

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40222

G. Full Name, Mailing Address and ZIP Code

Mr. Larry Boles
 200 C Street, S.E.
 Room 306

Purpose of Disbursement

Consulting Services

Date (month,
day, year)Amount of Each
Disbursement This Period

02-15-84

500.00

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Washington, DC 20002

H. Full Name, Mailing Address and ZIP Code

Ms. Sharon Pierce
 5609 Oxford, Apt 847

Purpose of Disbursement

Salary

Date (month,
day, year)Amount of Each
Disbursement This Period

02-14-84

498.51

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

Louisville, KY 40291

I. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
 3201
 Leith Lane, Apt 715
 Louisville, KY 40218

Purpose of Disbursement

Travel Reimbursement

Date (month,
day, year)Amount of Each
Disbursement This Period

03-16-84

196.20

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Disbursements This Page (optional)

5541.47

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|---|-------------------------|---|
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222 | Salary | 02-14-84 | 220.30 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Mary Jane Geis 602 Wallace Ave. Louisville, KY 40207 | Salary | 01-13-84 | 173.82 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage | 01-05-84 | 400.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Airplane Rental | 03-24-84 | 643.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage | 02-14-84 | 500.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202 | Travel Expenses | 01-09-84 | 328.00 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary | 03-13-84 | 1061.69 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Furniture Rental | 02-04-84 | 285.86 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222 | Telephone Service | 03-24-84 | 771.34 |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 4384.01 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 (Use separate schedule(s) for each
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-31-84 | 434.15 |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-28-84 | 498.51 |
| Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-29-84 | 345.09 |
| Sprint Accounts Receivable Dept. Pittsburg, PA 15254 | Telephone Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-02-84 | 502.11 |
| Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-28-84 | 275.38 |
| Ms. Mary Jane Geis 602 Wallace Ave. Louisville, KY 40207 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-14-84 | 55.00 |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-16-84 | 400.00 |
| Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601 | Clipping Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-04-84 | 59.47 |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-08-84 | 200.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 2769.71 |
| TOTAL This Period (last page this line number only) | | | |

3
3
3
0
9
0
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2
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8

SCHEDULE B

ITEMIZED DISBURSEMENTS

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(Use separate schedule(s) for each
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Summary Page).

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Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|---|-------------------------------------|--|
| A. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202 | Purpose of Disbursement Airplane Ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-04-84 | Amount of Each Disbursement This Period 246.00 |
| B. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-24-84 | Amount of Each Disbursement This Period 53.76 |
| C. Full Name, Mailing Address and ZIP Code Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Purpose of Disbursement Furniture Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-19-84 | Amount of Each Disbursement This Period 285.86 |
| D. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-04-84 | Amount of Each Disbursement This Period 3114.66 |
| E. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 01-13-84 | Amount of Each Disbursement This Period 434.15 |
| F. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-13-84 | Amount of Each Disbursement This Period 502.16 |
| G. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202 | Purpose of Disbursement Computer Assistance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-12-84 | Amount of Each Disbursement This Period 1937.76 |
| H. Full Name, Mailing Address and ZIP Code Sullivan Screen Print Co., Inc. 3808 Fitzgerald Rd. Louisville, KY 40216 | Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02-19-84 | Amount of Each Disbursement This Period 640.82 |
| I. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254 | Purpose of Disbursement Telephone Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03-09-84 | Amount of Each Disbursement This Period 538.14 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7753.31 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 14 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page).

Line: 17

Page 14 of 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-13-84 | 275.38 |
| B. Full Name, Mailing Address and ZIP Code Mr. J. R. Harris Washington, DC 20003 | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-12-84 | 369.04 |
| C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-16-84 | 200.00 |
| D. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601 | Clipping Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-13-84 | 143.94 |
| E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-13-84 | 200.00 |
| F. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202 | Travel Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 328.00 |
| G. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-29-84 | 1061.69 |
| H. Full Name, Mailing Address and ZIP Code Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Furniture Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-13-84 | 285.86 |
| I. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02-19-84 | 383.78 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3247.69 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 15 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page).

Line: 17

Page 15 of 16

| Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|--|-------------------------|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Pitney Bowes Credit Corporation Office Equipment | | | |
| P.O. Box 38460 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 02-19-84 | 347.97 |
| Louisville, KY 40233 | <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard | Salary | | |
| 3629 Fountain Drive, Apt 3 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 02-14-84 | 434.15 |
| Louisville, KY 40218 | <input type="checkbox"/> Other (specify): | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce | Salary | | |
| 5609 Oxford, Apt 847 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 03-29-84 | 502.16 |
| Louisville, KY 40291 | <input type="checkbox"/> Other (specify): | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack | Salary | | |
| 3201 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 01-31-84 | 348.28 |
| Leith Lane, Apt 715 | <input type="checkbox"/> Other (specify): | | |
| Louisville, KY 40218 | | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Com-Bro, Inc. | Computer Programing | | |
| 1939 Goldsmith Lane | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 03-18-84 | 1440.00 |
| Louisville, KY 40218 | <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Joan Steurer | Salary | | |
| 4222 Brookhaven Ave. | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 01-13-84 | 446.24 |
| Louisville, KY 40220 | <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Maureen Shea | Salary | | |
| 617 Hatherleigh | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 03-29-84 | 275.38 |
| Louisville, KY 40222 | <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Internal Revenue Service | Income Taxes-General | | |
| Internal Revenue Service Center | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 03-12-84 | 1109.00 |
| Memphis, TN 37501 | <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster | Postage | | |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 01-27-84 | 200.00 |
| Louisville, KY 40201 | <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 5103.18 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 16 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page).

Line: 17

Page 16 of 16

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| U.S. Postmaster | Postage | | |
| Louisville, KY 40201 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-19-84 | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Main Travel Agency, Inc. 730 W. Main Street | Travel Expense | | |
| Louisville, KY 40202 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-24-84 | 328.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Odell, Roper & Associates, Inc. 7316 Wisconsin Ave. | Direct Mail | | |
| Bethesda, MD 20814 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 01-09-84 | 43000.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Neil Huffman 7501 Hunting Creek Drive | In-Kind Campaign Car | | |
| Prospect, KY 40059 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-31-84 | 200.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jimmy A. Kincer 15025 Bircham Road | In-Kind Office Equipment | | |
| Louisville, KY 40243 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-31-84 | 350.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The National Congressional Club P. O. Box 18848 | In-Kind Mailing List - Names | | |
| Raleigh, NC 27619 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-31-84 | 473.45 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mrs. Beverly C. Wheatley 343 Kenwood Hill Rd. | In-Kind Office Furniture | | |
| Louisville, KY 40214 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03-31-84 | 200.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 45551.45 |
| TOTAL This Period (last page this line number only) | | | 351941.88 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
LINE NUMBER 20(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page).

Line: 20(a)

Page 1 of 1

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. H. W. Cates
7 Arrowhead Road

Louisville, KY 40207

Purpose of Disbursement

Refund

Disbursement for: ☒ Primary ☒ General
☐ Other (specify):

Date (month,
day, year)

02-04-84

Amount of Each
Disbursement This Period

200.00

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
day, year)

Amount of Each
Disbursement This Period

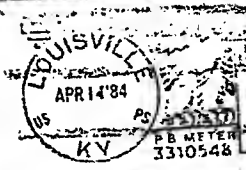
200.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

200.00

84020090130



FIRST CLASS MAIL

**TOUCHE ROSS & CO.
510 WEST BROADWAY
LOUISVILLE, KY. 40202**

TO: *SECRETARY OF THE SENATE*
119 D. STREET, N.E.
WASHINGTON, D.C. 20510

**RETURN RECEIPT
REQUESTED**

CERTIFIED

P 574 047 523

MAIL

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: Postmarked 4/14/84

☒ CERTIFIED _____
REGISTERED _____
FEDERAL EXPRESS _____
EXPRESS MAIL _____

84020090340

(Summary Page)

ALIGN AREA

1 Name of Committed (with Full)

McConnell Senate Committee

Address (Number and Street)

P. O. Box 1496

City, State and Zip Code

Louisville, KY 40201

2. FEC Identification Number

C00155051

er 17 PM 1: 20

3. Is this Report an Amendment?

☐ YES ☒ NO

☐ Check if address is different than previously reported.

TYPE OF REPORT

4. TYPE OF REPORT
- | | |
|---|--|
| <input type="checkbox"/> April 15 Quarterly Report | <input checked="" type="checkbox"/> Twelfth day report preceding <u>Primary</u> (Type of Election) |
| <input type="checkbox"/> July 15 Quarterly Report | election on <u>May 29, 1984</u> in the State of <u>Kentucky</u> |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____ |
| <input type="checkbox"/> January 31 Year End Report | <input type="checkbox"/> Termination Report |
| <input type="checkbox"/> July 31 Mid Year Report (Non-election Year Only) | |

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

| SUMMARY | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---------|--|-------------------------|-----------------------------------|
| 5. | Covering Period <u>April 1, 1984</u> through <u>May 9, 1984</u> | | |
| 6. | Net Contributions (other than loans) | | |
| (a) | Total Contributions (other than loans) (From Line 11 (e)) | 99,958 | 280,838 |
| (b) | Total Contribution Refunds (from Line 20 (d)). | | 200 |
| (c) | Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a)) . . . | 99,958 | 280,638 |
| 7. | Net Operating Expenditures | | |
| (a) | Total Operating Expenditures (from Line 17). | 120,612 | 473,950 |
| (b) | Total Offsets to Operating Expenditures (from Line 14). | 565 | 577 |
| (c) | Net Operating Expenditures (Subtract Line 7 (b) from 7 (a)) | 120,047 | 473,373 |
| 8. | Cash on Hand at Close of Reporting Period (from Line 27) | 204,045 | |
| 9. | Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D) | | |
| 10. | Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D) | 64,215 | |

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry J. Steinberg
Type or Print Name of Treasurer

Type or Print Name of Treasurer

Larry I. Steinberg
SIGNATURE OF TREASURER

May 16, 1984
Date

SIGNATURE OF TREASURER

SIGNATURE OF TREASURER

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

| Name of Committee (In Full) | | Report Covering the Period: | |
|--|---------|-------------------------------|-----------------------------------|
| McConnell Senate Committee | | From: April 1, 1984 | To: May 9, 1984 |
| | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| I. RECEIPTS | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: | | | |
| (a) Individuals/Persons Other Than Political Committees | 72,868 | 239,404 | 11 (a) |
| (Memo Entry Unitemized \$ 20,397) | | | |
| (b) Political Party Committees | 663 | 1,614 | 11 (b) |
| (c) Other Political Committees | 26,427 | 39,820 | 11 (c) |
| (d) The Candidate | | | 11 (d) |
| (e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)). | 99,958 | 280,838 | 11 (e) |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | 12 |
| 13. LOANS: | | | |
| (a) Made or Guaranteed by the Candidate | | | 13 (a) |
| (b) All Other Loans | | | 13 (b) |
| (c) TOTAL LOANS (add 13 (a) and 13 (b)). | | | 13 (c) |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 565 | 577 | 14 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 2,471 | 6,069 | 15 |
| 16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15) | 102,994 | 287,484 | 16 |
| II. DISBURSEMENTS | | | |
| 17. OPERATING EXPENDITURES | 120,612 | 473,950 | 17 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | 18 |
| 19. LOAN REPAYMENTS: | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | | 19 (a) |
| (b) Of All Other Loans | | | 19 (b) |
| (c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)). | | | 19 (c) |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | 200 | 20 (a) |
| (a) Individuals/Persons Other Than Political Committees | | | 20 (b) |
| (b) Political Party Committees | | | 20 (c) |
| (c) Other Political Committees | | 200 | 20 (d) |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c)) | | | |
| 21. OTHER DISBURSEMENTS | | | 21 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21) | 120,612 | 474,150 | 22 |
| III. CASH SUMMARY | | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | 221,663 | 23 |
| 24. TOTAL RECEIPTS THIS PERIOD (From Line 16) | \$ | 102,994 | 24 |
| 25. SUBTOTAL (Add Line 23 and Line 24) | \$ | 324,657 | 25 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) | \$ | 120,612 | 26 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) | \$ | 204,045 | 27 |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Ailes Communications 456 West 43rd Street New York, NY 10036 | 40,600 | | 4,426 | 36,174 |
| Nature of Debt (Purpose): Communications training | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| ABC Printing Company 3520 College Drive Jeffersontown, KY 40299 | 1,083 | 4,642 | 1,502 | 4,223 |
| Nature of Debt (Purpose): Printing | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Sprint Accounts Receivable Department Pittsburgh, PA 15254 | 810 | | 810 | |
| Nature of Debt (Purpose): Long Distance telephone charges | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| South Central Bell P. O. Box 32440 Louisville, KY 40232 | 903 | 3,094 | 2,115 | 1,882 |
| Nature of Debt (Purpose): Telephone service | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | 16,198 | | 2,025 | 14,173 |
| Nature of Debt (Purpose): Office rent | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Datapoint Corporation P. O. Box 84490 Dallas, TX 75284 | | 6,495 | 3,101 | 3,394 |
| Nature of Debt (Purpose): Computer equipment | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | \$59,846 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

1016110201840

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor K.S. Air, Inc. P. O. Box 7183 Louisville, KY 40207 | | 739 | 84 | 655 |
| Nature of Debt (Purpose): Airplane rental | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299 | 988 | | 270 | 718 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233 | 2,436 | | 348 | 2,088 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206 | | 908 | | 908 |
| Nature of Debt (Purpose): Airplane tickets | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | \$4,369 |
| 2) TOTAL This Period (last page this line only) | | | | \$64,215 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

840201003

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 14 for
LINE NUMBER 1(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
|---|--|-------------------------------------|---|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Irene M. Vandiviere 8429 Brookhaven Drive Lexington, KY 40502 | Name of Employer University of Kentucky Occupation Research Assistant | Date (month, day, year) 04-03-84 | Amount of Each Receipt this Period 50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 250.00 | |
| B. Full Name, Mailing Address and ZIP Code Dr. Eli Boggs Hazard, KY 41701 | Name of Employer self Occupation Physician | Date (month, day, year) 04-16-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 300.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Joseph B. Woodlief 331 Zorn Ave., #5 Louisville, KY 40206 | Name of Employer Glenmore Distilleries Co. Occupation Executive | Date (month, day, year) 04-13-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 300.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. C. T. Cone 474 W Third St Lexington, KY 40508 | Name of Employer Stoll, Keenon & Park Occupation Attorney | Date (month, day, year) 05-03-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 500.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Ed M. Farrow P. O. Box 20196 Dallas, TX 75220 | Name of Employer Trinity Equipment Occupation businessman | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 500.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201 | Name of Employer Hunt Energy Occupation Executive | Date (month, day, year) 05-09-84 | Amount of Each Receipt This Period 1000.00 In-Kind Reception #1 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 2146.27 | |
| G. Full Name, Mailing Address and ZIP Code Mr. James D. Klingbeil 42 E. Gay Street Columbus, OH 43215 | Name of Employer The Klingbeil Mgmt Group, Inc. Occupation President | Date (month, day, year) 04-20-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | 2000.00 | |
| SUBTOTAL of Receipts This Page (optional): | | | 3450.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 14 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Eddie J. Moore
 Box 1479

Hyden, KY 41749

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

self

Occupation

businessman

Aggregate Year-to-Date—\$

Date (month,
 day, year)

04-05-84

Amount of Each
 Receipt this Period

250.00

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. W. C. Perry
 3820 Austin Avenue

Waco, TX 76710

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date—\$

Date (month,
 day, year)

04-18-84

Amount of Each
 Receipt This Period

1000.00

1000.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Vicki C. Sistrunk
 4018 Deer Lake Cr.

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Jefferson County Gov.

Occupation

Executive Secretary

Aggregate Year-to-Date—\$

Date (month,
 day, year)

05-09-84

Amount of Each
 Receipt This Period

250.00

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. C. Gordon Wade
 2730 Main Chase Ln.

Covington, KY 41017

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

self

Occupation

business consultant

Aggregate Year-to-Date—\$

Date (month,
 day, year)

05-01-84

Amount of Each
 Receipt This Period

500.00

500.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Edna Booth
 U.S. Highway 42
 Box 213

Union, KY 41091

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self employed

Occupation

Homemaker

Aggregate Year-to-Date—\$

Date (month,
 day, year)

05-01-84

Amount of Each
 Receipt This Period

500.00

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Joseph B. Woodlief
 331 Zorn Ave., #5

Louisville, KY 40206

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Glenmore Distilleries Co.

Occupation

Executive

Aggregate Year-to-Date—\$

Date (month,
 day, year)

05-09-84

Amount of Each
 Receipt This Period

100.00

300.00

G. Full Name, Mailing Address and ZIP Code

Mr. Aubrey W. Conway
 4 Addison Court

Louisville, KY 40216

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Bank of St. Helen's

Occupation

Banker

Aggregate Year-to-Date—\$

Date (month,
 day, year)

04-23-84

Amount of Each
 Receipt This Period

250.00

250.00

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 14 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
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Summary Page)

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|---|------------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mrs. Ellen Hunt Flowers 3837 Colgate | self | 04-18-84 | 500.00 |
| Dallas, TX 75225 | Occupation homemaker | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date-\$ | 500.00 | |
| <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Harold L. Hall, II 1940 Eaton Avenue | self | 04-05-84 | 750.00 |
| Owensboro, KY 42301 | Occupation Real Estate | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date-\$ | 750.00 | |
| <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201 | Hunt Energy | 05-09-84 | 146.27 |
| | Occupation Executive | | In-Kind Reception #1 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Aggregate Year-to-Date-\$ | 2146.27 | |
| <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. William L. Koontz 3014 Juniper Hill Road | University of Louisville | 05-07-84 | 1000.00 |
| Louisville, KY 40206 | Occupation physician | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date-\$ | 1000.00 | |
| <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William E. Morris, Jr. 7408 Stonecrest Drive | Rayman Nasher Company | 04-18-84 | 500.00 |
| Dallas, TX 75240 | Occupation Vice President | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date-\$ | 500.00 | |
| <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. James F. Smith 6350 LBJ Freeway | Texas Oil & Gas Inc. | 04-18-84 | 500.00 |
| Dallas, TX 75240 | Occupation businessman | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date-\$ | 500.00 | |
| <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Arthur J. Wessely 9109 Clearlake | self | 04-18-84 | 500.00 |
| Dallas, TX 75225 | Occupation homemaker | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date-\$ | 1500.00 | |
| <input type="checkbox"/> Other (specify): | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 3896.27 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 14 for
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(Use separate schedule(s) for each
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|---|---|-------------------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Clark W. Breeding P. O. Box 12447 Dallas, TX 75225 | Name of Employer self Occupation businessman | Date (month, day, year) 04-18-84 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Robert A. Yarber 8300 Douglas, Suite 800 Dallas, TX 75225 | Name of Employer Robert A. Yarber Realty Co. Occupation owner | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| C. Full Name, Mailing Address and ZIP Code Dr. Clinton C. Cook, III 1 Arden Road Glenview, KY 40025 | Name of Employer Self Occupation Doctor | Date (month, day, year) 05-01-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mr. Robert E. Fox 1405 Meganwood Circle Lexington, KY 40502 | Name of Employer self Occupation builder | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 250.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Irene S. Hall 820 Rugby Place Louisville, KY 40222 | Name of Employer self Occupation homemaker | Date (month, day, year) 04-23-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Raymond F. Kravis 1804 First National Building Tulsa, OK 74103 | Name of Employer self Occupation oil and gas investments | Date (month, day, year) 05-07-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 1000.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Greg C. Mosher 1615 Vance Avenue P. O. Box 2338 Fort Wayne, IN 46801 | Name of Employer K & K Insurance Agency, Inc. Occupation President | Date (month, day, year) 04-20-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 1000.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 4250.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11(a)
(Use separate schedule(s) for each
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Summary Page)

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|---|---|--------------------------------------|--|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Neville Smith 148 Locust Manchester, KY 40962 | Name of Employer self employed | Date (month, day, year) 05-04-84 | Amount of Each Receipt this Period 400.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 400.00 | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Arthur J. Wessely 9109 Clearlake Dallas, TX 75225 | Name of Employer self | Date (month, day, year) 05-07-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 1500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. David C. Brodie P.O. Box 642 Owensboro, KY 42302 | Name of Employer none | Date (month, day, year) 04-20-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. John H. Yost 13100 Osage Rd. North Anchorage, KY 40223 | Name of Employer Information Requested | Date (month, day, year) 05-08-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Daniel W. Cook, III 5970 Westgrove Drive Dallas, TX 75270 | Name of Employer Goldman Sachs and Company | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Businessman | Aggregate Year-to-Date-\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Gaston Hallam 4278 Bordeaux Avenue Dallas, TX 75235 | Name of Employer Ben E. Keith Company | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman of the Exec. Comm. | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Robert F. Inlow 3517 Centenary Dallas, TX 75225 | Name of Employer self | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2900.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|-----------------------------------|---------------------------|------------------------------------|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Eugene L. Langley 2105 Club Lake Court San Angelo, TX 76904 | GTE Telephone Co. | 04-18-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ | 500.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Donald H. Putnam, Jr. P. O. Box 991 Ashland, KY 41101 | Putnam Agency | 04-10-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Insurance Exec. | Aggregate Year-to-Date—\$ | 1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Mary Clay Stites 4326 Glenview Avenue Glenview, KY 40025 | self employed | 05-09-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Jewelry designer | Aggregate Year-to-Date—\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Lin E. Barbee 7009 Deloache Dallas, TX 75225 | self | 04-30-84 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation investments | Aggregate Year-to-Date—\$ | 300.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Arthur J. Wessely 9109 Clearlake Dallas, TX 75225 | self | 05-07-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ | 1500.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Donald Bryant, Jr. 100 N. Broadway Suite 1770 Saint Louis, MO 63102 | Bryant Planning Group, Inc. | 04-30-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman | Aggregate Year-to-Date—\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Milton S. Yunker P.O. Box 1983 Owensboro, KY 42302 | Zogg Oil Company | 04-23-84 | 470.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Oil & Gas Developer | Aggregate Year-to-Date—\$ | 1030.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 4270.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Lionel Hawse
701 Old Dobbin Road

Lexington, KY 40502

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Occupation
attorney

Date (month,
day, year)

04-23-84

Amount of Each
Receipt This Period

250.00

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Ivan Irwin
4100 Thanksgiving Tower

Dallas, TX 75201

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Shank, Irwin & Conant

Occupation
attorney

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Edith Jones O'Donnell
3366 Interfirst One

Dallas, TX 75202

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

none

Occupation
homemaker

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. M. B. Rudman
711 Mercantile Dallas Bldg.

Dallas, TX 75201

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Occupation
Oil & Gas Producer

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. C. W. Stoll
Mockingbird Valley Road
Rock Hill
Louisville, KY 40207

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

none

Occupation
Retired

Date (month,
day, year)

04-24-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Louis A. Beecherl, Jr.
3801 Beverly Drive

Dallas, TX 75205

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Occupation
businessman

Date (month,
day, year)

05-07-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Edith Weyland
359 Ridgeway Avenue

Louisville, KY 40207

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Information Requested

Occupation
Bookkeeper

Date (month,
day, year)

05-09-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

4750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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|---|---|-------------------------------------|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Frank M. Burke, Jr. 3701 Lexington Dallas, TX 75205 | Name of Employer Peat, Harwick Occupation Sr. Partner | Date (month, day, year) 04-18-84 | Amount of Each Receipt this Period 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 300.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Milton S. Yunker P.O. Box 1983 Owensboro, KY 42302 | Name of Employer Zogg Oil Company Occupation Oil & Gas Developer | Date (month, day, year) 04-23-84 | Amount of Each Receipt This Period 530.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 1030.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mr. A. Myers Davis 395 Redding Rd. #68 Lexington, KY 40502 | Name of Employer self Occupation A. Myers Davis Dev. Co., Inc. | Date (month, day, year) 04-24-84 | Amount of Each Receipt This Period 750.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 750.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mrs. A. G. Galt P. O. Box 1709 Dallas, TX 75221 | Name of Employer self Occupation Homemaker | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| E. Full Name, Mailing Address and ZIP Code Dr. Stephen W. Hiltz Erlanger Med. Plaza #208 3104 Dixie Highway Erlanger, KY 41018 | Name of Employer self Occupation Doctor | Date (month, day, year) 04-27-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Peter O'Donnell, Jr. 3366 Interfirst One Dallas, TX 75202 | Name of Employer self Occupation Real Estate | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. H. G. Schiff Capital Bank Building 5307 E. Mockingbird Ln., Ste 1001 Dallas, TX 75206 | Name of Employer self Occupation oil | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ 500.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 3580.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 9 of 14 for
LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---|---|--|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Gillis Thomas 8333 Douglas, Suite 1414 Dallas, TX 75225 | Name of Employer Gillis Thomas Company | Date (month, day, year) 04-18-84 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date—\$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. John E. Bickel, Jr. 2906 Cheyenne Dr. Owensboro, KY 42301 | Name of Employer self | Date (month, day, year) 04-23-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date—\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. James B. Williams 4425 Belfort Dallas, TX 75205 | Name of Employer Ben C. Williams Bakery Service | Date (month, day, year) 04-18-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Russell Harris Davis, Sr. 643 North 29th Street Louisville, KY 40212 | Name of Employer Lou. & Jeff. Co. Conv. Bureau | Date (month, day, year) 04-19-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Clerk | Aggregate Year-to-Date—\$ 205.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Gene P. Gardner 8914 Ayrshire Avenue Louisville, KY 40222 | Name of Employer Louisville Cement Co. | Date (month, day, year) 04-17-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Manager | Aggregate Year-to-Date—\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Robert F. Houlihan 1000 First Security Plaza Lexington, KY 40507 | Name of Employer self | Date (month, day, year) 05-03-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Conrad L. Keado 11880 Shiloh Road Dallas, TX 75228 | Name of Employer Information Requested | Date (month, day, year) 05-08-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2850.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 10 of 14 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Ellice McDonald, Jr.
 Building C, Suite 300
 3801 Kennett Pike
 Greenville, DE 19807

Name of Employer

none

Date (month,
day, year)

04-20-84

Amount of Each
Receipt this Period

1000.00

Occupation
retired

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. James Park, Jr.
 116 N. Upper

Name of Employer

Brown, Todd & Heyburn

Date (month,
day, year)

04-10-84

Amount of Each
Receipt This Period

1000.00

Occupation
attorney

Lexington, KY 40507

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William L. Schilling
 7 Willow Wood

Name of Employer

Peat, Harwick

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

500.00

Occupation
Managing Partner

Dallas, TX 75205

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Louise Thomason
 P. O. Box 425
 305 North Main Street
 Leitchfield, KY 42754

Name of Employer

Farm Bureau Insurance

Date (month,
day, year)

04-20-84

Amount of Each
Receipt This Period

250.00

Occupation
Secretary

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 350.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth Q. Bird
 P. O. Box 478
 1630 Dean Avenue
 Owensboro, KY 42302

Name of Employer

self

Date (month,
day, year)

04-20-84

Amount of Each
Receipt This Period

250.00

Occupation
homemaker

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Web Carr
 5938 Desco

Name of Employer

self

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

250.00

Occupation
businessman

Dallas, TX 75225

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Ralph Drees
 22A Linden Hill Dr

Name of Employer

self

Date (month,
day, year)

05-01-84

Amount of Each
Receipt This Period

500.00

Occupation
homemaker

Crescent Spring, KY 41011

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Page 11 of 14 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code
 Mr. Calvin R. Gearhart
 P. O. Box 1264

Name of Employer

self

Date (month,
day, year)

05-09-84

Amount of Each
Receipt this Period

250.00

Ashland, KY 41105

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
attorney

Aggregate Year-to-Date—\$

350.00

B. Full Name, Mailing Address and ZIP Code
 Mr. Neil Huffman
 7501 Hunting Creek Drive

Name of Employer

Self Employed

Date (month,
day, year)

05-09-84

Amount of Each
Receipt This Period

100.00

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
Auto Dealer

Aggregate Year-to-Date—\$

300.00

In-Kind
Campaign Car

C. Full Name, Mailing Address and ZIP Code
 Mr. Jimmy A. Kincer
 15025 Bircham Road

Name of Employer

Copy Corporation

Date (month,
day, year)

05-09-84

Amount of Each
Receipt This Period

175.00

Louisville, KY 40243

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
owner

Aggregate Year-to-Date—\$

525.00

In-Kind
Office Equipment

D. Full Name, Mailing Address and ZIP Code
 Mr. Ronald R. Parry
 600 Greenup St.
 P. O. Box 472
 Covington, KY 41011

Name of Employer

Robinson, Arnzen, Parry & Wentz

Date (month,
day, year)

05-08-84

Amount of Each
Receipt This Period

500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
Attorney

Aggregate Year-to-Date—\$

500.00

E. Full Name, Mailing Address and ZIP Code
 Mr. William B. Schmidt
 720 Sunrise Lane

Name of Employer

Coco-Cola-Elizabethtown

Date (month,
day, year)

04-20-84

Amount of Each
Receipt This Period

1000.00

Elizabethtown, KY 42701

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
Business Executive

Aggregate Year-to-Date—\$

1000.00

F. Full Name, Mailing Address and ZIP Code
 Mr. William H. Thomason
 407 Wallace Ave.
 P.O. Box 425
 Leitchfield, KY 42754

Name of Employer

Self

Date (month,
day, year)

04-20-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
Insurance

Aggregate Year-to-Date—\$

350.00

G. Full Name, Mailing Address and ZIP Code
 Mr. John E. Bird
 1630 Dean Avenue
 P. O. Box 478
 Owensboro, KY 42302

Name of Employer

self

Date (month,
day, year)

04-20-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation
Geologist

Aggregate Year-to-Date—\$

250.00

SUBTOTAL of Receipts This Page (optional)

2525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 12 of 14 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|-------------------------------------|-----------------------------------|------------------------------------|
| Mr. Thomas A. Wood 9108 Nottingham Pkwy. Louisville, KY 40222 | Information Requested | 04-26-84 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 300.00 | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Jane Clark 1400 Willow-2101 Louisville, KY 40204 | self employed | 05-09-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Robert S. Driscoll 63 Wall Street New York, NY 10005 | none | 05-07-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Patrick J. F. Gratton 2403 Thomas Dallas, TX 75201 | self | 04-18-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation geologist | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code Dr. Walter I. Hume, Jr. 2012 Starmont Road Louisville, KY 40207 | self | 05-08-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Robert Klabzuba 2104 Texas American Bank Bldg. Fort Worth, TX 76102 | self | 04-20-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation geologist | Aggregate Year-to-Date-\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Virginia Mitchell 1520 Castlewood Louisville, KY 40204 | self | 04-13-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 5300.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 13 of 14 for
 LINE NUMBER II(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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|---|------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Edwin H. Perry 1415 Willow Avenue Louisville, KY 40204 | self | 05-01-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Harold Simmons 4835 LBJ Freeway, Suite 600 Dallas, TX 75234 | Contman Corporation | 04-18-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President & Chairman | Aggregate Year-to-Date—\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Faye Thurman 8906 Ayrshire Avenue Louisville, KY 40222 | self | 04-13-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ | 2000.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Clay M. Bishop, Jr. 101 Walters Street P. O. Box 468 Manchester, KY 40962 | self | 04-19-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date—\$ | 1100.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. William J. Wood 3005 Bryan Station Road Lexington, KY 40511 | Self | 05-09-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | Aggregate Year-to-Date—\$ | 500.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. J. D. Guffey Campbell Centre I, Suite M-2150 Dallas, TX 75206 | self | 04-18-84 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation oil | Aggregate Year-to-Date—\$ | 500.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Caroline Hunt Hunt Energy Corporation 2400 Thanksgiving Tower Dallas, TX 75201 | self | 05-09-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date—\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3850.00 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. James D. Klingbeil
42 E. Gay Street

Columbus, OH 43215

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

The Klingbeil Mgmt Group, Inc.

Date (month,
day, year)

04-20-84

Amount of Each
Receipt this Period

1000.00

Occupation
President

Aggregate Year-to-Date-\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Thomas W Moller
P. O. Box 2059

111 Church Street
Lexington, KY 40594

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Interest Rate Management, Inc.

Date (month,
day, year)

05-07-84

Amount of Each
Receipt This Period

1000.00

Occupation
President

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Dr. W. C. Perry
3820 Austin Avenue

Waco, TX 76710

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

04-18-84

Amount of Each
Receipt This Period

1000.00

Occupation
Doctor

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. James Sistrunk
4018 Deer Lake Cr.

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jefferson County Government

Date (month,
day, year)

05-09-84

Amount of Each
Receipt This Period

250.00

Occupation
Executive

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Faye Thurman
8906 Ayrshire Avenue

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

04-13-84

Amount of Each
Receipt This Period

1000.00

Occupation
homemaker

Aggregate Year-to-Date-\$ 2000.00

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt This Period

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

52471.27

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (b)
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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Nat. Republican Senatorial Com. 404 C. Street, N.E. Washington, DC 20002 | | 05-09-84 | 562.50 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | In-Kind Survey |
| | Aggregate Year-to-Date—\$ | 562.50 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Women's Republican Club Hopkins County Miss Agnes Vickers, Treas. Earlington, KY 42410 | | 04-10-84 | 100.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | 100.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | 662.50 |
| TOTAL This Period (last page this line number only) | | | 662.50 |

SCHEDULE A

ITEMIZED RECEIPTS

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category of the Detailed
Summary Page)

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|---|--|--|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee A. Full Name, Mailing Address and ZIP Code HOUPAC Mr. Jack M. Webb P. O. Box 27497 Houston, TX 77027 | | Name of Employer Occupation | Date (month, day, year) 04-18-84 Amount of Each Receipt this Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code ALIGNPAC Mr. Donald L. Bryant, Jr. 4640 S. W. Macadam, Suite 250 Portland, OR 97201 | | Name of Employer Occupation | Date (month, day, year) 04-30-84 Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 2000.00 | |
| C. Full Name, Mailing Address and ZIP Code Print PAC Mr. Benjamin Y. Cooper, Treasurer 1730 North Lynn Street Arlington, VA 22209 | | Name of Employer Occupation | Date (month, day, year) 05-09-84 Amount of Each Receipt This Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code ALIGNPAC Mr. Donald L. Bryant, Jr. 4640 S. W. Macadam, Suite 250 Portland, OR 97201 | | Name of Employer Occupation | Date (month, day, year) 04-30-84 Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 2000.00 | |
| E. Full Name, Mailing Address and ZIP Code Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201 | | Name of Employer Occupation | Date (month, day, year) 05-09-84 Amount of Each Receipt This Period 1026.81 In-Kind Reception #1 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 4026.81 | |
| F. Full Name, Mailing Address and ZIP Code Public Service PAC Mr. Roman K. Rice III, Treasurer 8330 Old Courthouse Road, Ste 600 Vienna, VA 22180 | | Name of Employer Occupation | Date (month, day, year) 04-25-84 Amount of Each Receipt This Period 5000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 5000.00 | |
| G. Full Name, Mailing Address and ZIP Code Assoc of Amer. Phys & Surg. PAC Mr. Charls Ord 5201-B Lyngate Court Burke, VA 22015 | | Name of Employer Occupation | Date (month, day, year) 05-09-84 Amount of Each Receipt This Period 5000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date—\$ 5000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 14526.81 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 3 for
LINE NUMBER 11 (C)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Fund For a Conservative Majority | | 04-19-84 | 500.00 |
| Mr. Robert C. Heckman, Chairman | Occupation | | |
| 302 Fifth Street, NE. | | | |
| Washington, DC 20002 | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date—\$ | | 1500.00 |
| <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| DALEN PAC | | 05-07-84 | 5000.00 |
| Ms. Patricia N. Wilson | Occupation | | |
| 5956 Sherry Lane, Suite 910 | | | |
| Dallas, TX 75225 | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date—\$ | | 5000.00 |
| <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Fund For a Conservative Majority | | 05-09-84 | 1000.00 |
| Mr. Robert C. Heckman, Chairman | Occupation | | |
| 302 Fifth Street, NE. | | | |
| Washington, DC 20002 | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date—\$ | | 1500.00 |
| <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Lone Star Steel PAC | | 04-18-84 | 500.00 |
| Mr. John M. Morris, Chairman | Occupation | | |
| P. O. Box 35888 | | | |
| Dallas, TX 75235 | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date—\$ | | 500.00 |
| <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| KY Gasoline Dealers Assn. PAC | | 04-19-84 | 100.00 |
| Mr. James F. Brenzel, President | Occupation | | |
| 902 Portland Federal Building | | | |
| Louisville, KY 40202 | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date—\$ | | 100.00 |
| <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| MAPCO PAC | | 05-02-84 | 1000.00 |
| Mr. Paul E. Thornbrugh, Chairman | Occupation | | |
| P. O. Box 645 | | | |
| Tulsa, OK 74101 | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date—\$ | | 1000.00 |
| <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| CLARK PAC | | 05-09-84 | 2500.00 |
| Mr. Thomson, President | Occupation | | |
| c/o Clark Equip. Co., Circle Dr. | | | |
| Buchanan, MI 49107 | | | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Aggregate Year-to-Date—\$ | | 2500.00 |
| <input type="checkbox"/> Other (specify): | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 10600.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 3 for
LINE NUMBER 11 (c)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mercantile National Bank
Mr. James H. Fudge, Treasurer
1704 Main Street
Dallas, TX 75265

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

04-18-84

500.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

500.00

B. Full Name, Mailing Address and ZIP Code

Colonial Life & Accident Ins. PAC
Mr. Gayle O. Averyt
1612 Marion Street
Columbia, SC 29201

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

04-20-84

500.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

500.00

C. Full Name, Mailing Address and ZIP Code

ESI-PAC
Mr. T. R. Armstrong, Chairman
P. O. Box 1359
Richardson, TX 75080

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

04-19-84

300.00

Occupation

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

300.00

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

26426.81

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 14
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|---|--------------------------------------|---|--|
| A. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | Name of Employer Occupation | Date (month, day, year) 4-10-84 4-24-84 | Amount of Each Receipt this Period \$438 \$127 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Media Time Refund</u> | Aggregate Year-to-Date—\$ <u>565</u> | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date—\$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | \$565 |
| TOTAL This Period (last page this line number only) | | | \$565 |

84020110121

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 15
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
|---|------------------|--|--|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) <u>McConnell Senate Committee</u> | | | |
| A. Full Name, Mailing Address and ZIP Code <u>Liberty National Bank</u> <u>416 West Jefferson Street</u> <u>Louisville, KY 40202</u> | Name of Employer | Date (month, day, year) <u>Monthly,</u> <u>April -</u> <u>May</u> | Amount of Each Receipt this Period <u>\$2,422</u> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on investment</u> | Occupation | Aggregate Year-to-Date—\$ <u>5,600</u> | |
| B. Full Name, Mailing Address and ZIP Code <u>Bank of Louisville</u> <u>500 West Broadway</u> <u>Louisville, KY 40202</u> | Name of Employer | Date (month, day, year) <u>Monthly,</u> <u>April -</u> <u>May</u> | Amount of Each Receipt This Period <u>\$39</u> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on investment</u> | Occupation | Aggregate Year-to-Date—\$ <u>459</u> | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | <u>\$2,461</u> |
| TOTAL This Period (last page this line number only) | | | <u>\$2,461</u> |

840117123

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

Page 1 of 8

Page ____ of ____ for
LINE NUMBER ____
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Connell Senate Committee

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Name of Committee (in Full)

Connell Senate Committee

| | | | |
|---|--|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218</p> | <p>Purpose of Disbursement Printing XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-26-84</p> | <p>Amount of Each Disbursement This Period 549.38</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202</p> | <p>Purpose of Disbursement Airplane Ticket XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-19-84</p> | <p>Amount of Each Disbursement This Period 328.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Performance Business Forms P.O. Box 100770 Nashville, TN 37210</p> | <p>Purpose of Disbursement Computer Supplies XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-19-84</p> | <p>Amount of Each Disbursement This Period 1047.65</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233</p> | <p>Purpose of Disbursement Office Equipment XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-19-84</p> | <p>Amount of Each Disbursement This Period 270.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Treasurer, Ky Unemployment Ins. Fund Frankfort, KY 40621</p> | <p>Purpose of Disbursement Payroll Taxes XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-13-84</p> | <p>Amount of Each Disbursement This Period 761.90</p> |
| <p>F. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299</p> | <p>Purpose of Disbursement Printing XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-19-84</p> | <p>Amount of Each Disbursement This Period 1501.72</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202</p> | <p>Purpose of Disbursement Office Supplies XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-19-84</p> | <p>Amount of Each Disbursement This Period 89.78</p> |
| <p>H. Full Name, Mailing Address and ZIP Code Commissioners of the Sinking Fund 617 West Jefferson St. Louisville, KY 40202</p> | <p>Purpose of Disbursement Payroll Taxes XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-13-84</p> | <p>Amount of Each Disbursement This Period 547.47</p> |
| <p>I. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207</p> | <p>Purpose of Disbursement Travel Reimbursement XX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Date (month, day, year) 04-10-84</p> | <p>Amount of Each Disbursement This Period 49.05</p> |
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | | | <p>5144.95</p> |
| <p>TOTAL This Period (last page this line number only)</p> | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

Page 2 of 8

Page ____ of ____ for
LINE NUMBER ____
(Use separate schedule(s) for each
category of the Detailed
Summery Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233 | Office Equipment XX | 04-19-84 | 347.97 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Trips & Tours unlimited, Inc 157 E. Reynolds Rd., Suite A Lexington, KY 40503 | Airplane Ticket XX | 04-19-84 | 338.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media XX | 05-08-84 | 4625.50 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202 | Office Supplies XX | 04-19-84 | 195.72 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Datapoint Corporation P.O. Box 93192 Chicago, IL 60673 | Computer Equipment XX | 04-19-84 | 3100.50 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary XX | 04-30-84 | 582.15 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time XX | 05-07-84 | 36009.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Telephone XX | 04-14-84 | 986.55 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| U.S. Postmaster Louisville, KY 40201 | Postage XX | 04-04-84 | 300.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 46485.39 |
| TOTAL This Period (last page this line number only) | | | |

9402011024

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page _____ of _____ for
 LINE NUMBER _____
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 3 of 8

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code
 Ailes Communications Inc.
 456 West 43rd Street

Purpose of Disbursement
MediaDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

05-02-84

6386.60

New York, NY 10036
 B. Full Name, Mailing Address and ZIP Code
 John Conti Company
 P.O. Box 18289

Purpose of Disbursement
Office SuppliesDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-17-84

47.10

Louisville, KY 40218
 C. Full Name, Mailing Address and ZIP Code
 Ms. Mary Gabriel Harpring
 3610 Glencreek Lane

Purpose of Disbursement
SalaryDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-13-84

82.61

Louisville, KY 40218
 D. Full Name, Mailing Address and ZIP Code
 Ms. Janet Mullins
 1249 Everett Ave.

Purpose of Disbursement
SalaryDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-13-84

1061.69

Louisville, KY 40204
 E. Full Name, Mailing Address and ZIP Code
 The Perkins Group, Inc.
 P.O. Box 50190

Purpose of Disbursement
MediaDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-02-84

26852.73

Indianapolis, IN 46250
 F. Full Name, Mailing Address and ZIP Code
 South Central Bell
 P.O. Box 32440

Purpose of Disbursement
TelephoneDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-19-84

1128.47

Louisville, KY 40232
 G. Full Name, Mailing Address and ZIP Code
 U.S. Postmaster

Purpose of Disbursement
PostageDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-04-84

1000.00

Louisville, KY 40201
 H. Full Name, Mailing Address and ZIP Code
 Ailes Communications Inc.
 456 West 43rd Street

Purpose of Disbursement
MediaDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-02-84

4426.07

New York, NY 10036
 I. Full Name, Mailing Address and ZIP Code
 John Conti Company
 P.O. Box 18289

Purpose of Disbursement
Office SuppliesDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☒ Primary ☐ General
☐ Other (specify):

04-19-84

95.00

Louisville, KY 40218

SUBTOTAL of Disbursements This Page (optional)

41080.27

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
LINE NUMBER ____
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Line: 17

Page 4 of 8

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|---|---|----------------------------|--|
| A. Full Name, Mailing Address and ZIP Code Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218 | Purpose of Disbursement Salary | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-30-84 | 275.38 |
| B. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Travel Reimbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-18-84 | 34.45 |
| C. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Purpose of Disbursement TV Time | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-24-84 | 5714.52 |
| D. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254 | Purpose of Disbursement Long Distance Calls | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-02-84 | 809.56 |
| E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-17-84 | 200.00 |
| F. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202 | Purpose of Disbursement Computer Services | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-19-84 | 248.07 |
| G. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Salary | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-30-84 | 1061.69 |
| H. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Purpose of Disbursement Petty Cash | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-04-84 | 185.61 |
| I. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Purpose of Disbursement Salary | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-13-84 | 449.88 |
| SUBTOTAL of Disbursements This Page (optional) | | | 8979.16 |
| TOTAL This Period (last page this line number only) | | | |

84020110126

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page _____ of _____ for
 LINE NUMBER _____
 (Use separate schedule(s) for each
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 Summary Page)

Line: 17

Page 5 of 8

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| | Postage | | |
| U.S. Postmaster | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-30-84 | 500.00 |
| Louisville, KY 40201 | | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Salary | | |
| Ms. Susan Ballard | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-13-84 | 434.15 |
| 3629 Fountain Drive, Apt 3 | | | |
| Louisville, KY 40218 | | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Travel Reimbursement | | |
| Mr. Terry Carmack | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-06-84 | 198.24 |
| 3201 | | | |
| Leith Lane, Apt 715 | | | |
| Louisville, KY 40218 | | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Airplane Travel | | |
| K. S. Air, Inc. | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-19-84 | 84.00 |
| 4510 Mt. Vernon Road | | | |
| Louisville, KY 40220 | | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Salary | | |
| Ms. Sharon Pierce | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-13-84 | 502.16 |
| 5609 Oxford, Apt 847 | | | |
| Louisville, KY 40291 | | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Salary | | |
| Ms. Joan Steurer | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-30-84 | 449.88 |
| 4222 Brookhaven Ave. | | | |
| Louisville, KY 40220 | | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Postage | | |
| U.S. Postmaster | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-30-84 | 500.00 |
| Louisville, KY 40201 | | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Salary | | |
| Ms. Susan Ballard | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-30-84 | 434.15 |
| 3629 Fountain Drive, Apt 3 | | | |
| Louisville, KY 40218 | | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Salary | | |
| Mr. Terry Carmack | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 04-13-84 | 363.90 |
| 3201 | | | |
| Leith Lane, Apt 715 | | | |
| Louisville, KY 40218 | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 3466.48 |
| TOTAL This Period (last page this line number only) | | | |

840110127

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
LINE NUMBER ____
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Line: 17

Page 6 of 8

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|---|-------------------------------------|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Kentucky State Treasurer Frankfort, KY 40601 | Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-13-84 | Amount of Each Disbursement This Period 999.40 |
| B. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-30-84 | Amount of Each Disbursement This Period 502.16 |
| C. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Purpose of Disbursement Reception Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-12-84 | Amount of Each Disbursement This Period 676.52 |
| D. Full Name, Mailing Address and ZIP Code Bank of Louisville 500 W. Broadway Louisville, KY 40202 | Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-13-84 | Amount of Each Disbursement This Period 268.36 |
| E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-30-84 | Amount of Each Disbursement This Period 363.90 |
| F. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-13-84 | Amount of Each Disbursement This Period 390.76 |
| G. Full Name, Mailing Address and ZIP Code Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Purpose of Disbursement Office Furniture Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-19-84 | Amount of Each Disbursement This Period 285.86 |
| H. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Purpose of Disbursement Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-02-84 | Amount of Each Disbursement This Period 2024.69 |
| I. Full Name, Mailing Address and ZIP Code Ms. Maureen Shea 617 Hatherleigh Louisville, KY 40222 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-13-84 | Amount of Each Disbursement This Period 220.30 |
| SUBTOTAL of Disbursements This Page (optional) | | | 5731.95 |
| TOTAL This Period (last page this line number only) | | | |

84020110128

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
LINE NUMBER ____
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 7 of 8

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|--|-------------------------------------|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Bank of Louisville 500 W. Broadway Louisville, KY 40202 | Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-13-84 | Amount of Each Disbursement This Period 2868.29 |
| B. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-30-84 | Amount of Each Disbursement This Period 390.76 |
| C. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-10-84 | Amount of Each Disbursement This Period 221.11 |
| D. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233 | Purpose of Disbursement Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 04-19-84 | Amount of Each Disbursement This Period 227.00 |
| E. Full Name, Mailing Address and ZIP Code Sixth District Republican Comm. 1204 West Main Street Shelbyville, KY 40065 | Purpose of Disbursement Research Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-01-84 | Amount of Each Disbursement This Period 1500.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | Purpose of Disbursement In-Kind Campaign Car Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-09-84 | Amount of Each Disbursement This Period 100.00 |
| G. Full Name, Mailing Address and ZIP Code Mrs. Caroline Hunt Hunt Energy Corporation 2400 Thanksgiving Tower Dallas, TX 75201 | Purpose of Disbursement In-Kind Reception #1 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-09-84 | Amount of Each Disbursement This Period 1000.00 |
| H. Full Name, Mailing Address and ZIP Code Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201 | Purpose of Disbursement In-Kind Reception #1 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-09-84 | Amount of Each Disbursement This Period 1000.00 |
| I. Full Name, Mailing Address and ZIP Code Mr. Nelson Bunker Hunt Hunt Energy 2400 Thanksgiving Tower Dallas, TX 75201 | Purpose of Disbursement In-Kind Reception #1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-09-84 | Amount of Each Disbursement This Period 146.27 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7453.43 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page _____ of _____ for
LINE NUMBER _____
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Line: 17

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Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement In-Kind Reception #1 | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|----------------------------|--|
| Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201 | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-09-84 | 1026.81 |
| B. Full Name, Mailing Address and ZIP Code Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, KY 40243 | Purpose of Disbursement In-Kind Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-09-84 | 175.00 |
| C. Full Name, Mailing Address and ZIP Code Nat. Republican Senatorial Com. 404 C. Street, N.E. Washington, DC 20002 | Purpose of Disbursement In-Kind Survey Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-09-84 | 562.50 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 1764.31 |
| TOTAL This Period (last page this line number only) | | | 120105.94 |

84020110130

RECEIVED AT THE FEC

Touche Ross & Co.
04 NOV 19 9:48

REC
SECRETARY OF THE SENATE

ISSN NOV 2

November 15, 1984

HAND DEL

Secretary of the Senate
232 Hart Senate Office Building
Washington, D.C. 20510

Re: McConnell Senate Committee, FEC Identification No. C00155051
June 30, 1984 Quarterly Report

Gentlemen:

In accordance with the letter which we have received from the Federal Election Commission (a copy of which is attached), please be advised that the \$25,000 loan reflected on the above named report was from personal funds of the candidate, as defined by FEC regulations, as cited in the attached letter.

Please accept this as an amendment to the above described report.

Very truly yours,

Larry J. Steinberg

Larry J. Steinberg
Treasurer/McConnell Senate Committee

LJS:pmf

Attachment

cc: Robin Kelly

84020261317



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20541

RECEIVED.
CLERK OF THE SENATE
1984 NOV 20 AM 9:18

NOV 6 1984 HAND DELIVERED ☐
RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: July Quarterly Report (5/10/84-6/30/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

84020261318

he Ross & Co.

510 West Broadway
Louisville, Kentucky 40202



Ms. Robin Kelly
Reports Analysis Division
Federal Election Commission
Washington, D.C. 20463

NOV 15 1988
FEC

84020261319

UNITED STATES SENATE

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

Form 202-27

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED

 Date of Receipt

☐ INSIDE MAIL

 Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS

 Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION

 Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER

POSTMARK

Nov. 15, 1984

AND OR DATE OF RECEIPT

84020261020

114

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

| Name of Committee (In Full) | | Report Covering the Period: | | |
|--|---------|-------------------------------|-----------------------------------|--------|
| McConnell Senate Committee | | From: May 10, 1984 | To: June 30, 1984 | |
| | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | |
| I. RECEIPTS | | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | 77,637 | 317,041 | 11 (a) | |
| (Memo Entry Unitemized \$ 22,249) | 2,062 | 3,676 | 11 (b) | |
| (b) Political Party Committees | 25,516 | 65,336 | 11 (c) | |
| (c) Other Political Committees | | | 11 (d) | |
| (d) The Candidate | 105,215 | 386,053 | 11 (e) | |
| (e) TOTAL CONTRIBUTIONS (other than loans (add 11 (a), 11 (b), 11 (c) and 11 (d)). | | | 12 | |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | | |
| 13. LOANS: | | 25,000 | 25,000 | 13 (a) |
| (a) Made or Guaranteed by the Candidate | | | 13 (b) | |
| (b) All Other Loans | 25,000 | 25,000 | 13 (c) | |
| (c) TOTAL LOANS (add 13 (a) and 13 (b)). | | 577 | 14 | |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | 1,491 | 7,560 | 15 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | | | |
| 16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15) | | 131,706 | 419,190 | 16 |
| II. DISBURSEMENTS | | | | |
| 17. OPERATING EXPENDITURES | | 112,835 | 586,785 | 17 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | | 18 |
| 19. LOAN REPAYMENTS: | | 25,000 | 25,000 | 19 (e) |
| (a) Of Loans Made or Guaranteed by the Candidate | | | 19 (b) | |
| (b) Of All Other Loans | 25,000 | 25,000 | 19 (c) | |
| (c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)). | | | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | | 200 | 20 (a) |
| (a) Individuals/Persons Other Than Political Committees | | | 20 (b) | |
| (b) Political Party Committees | | | 20 (c) | |
| (c) Other Political Committees | | 200 | 20 (d) | |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c)) | | | | |
| 21. OTHER DISBURSEMENTS | | | | 21 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21) | | 137,835 | 611,985 | 22 |
| III. CASH SUMMARY | | | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | | \$ | 204,045 | 23 |
| 24. TOTAL RECEIPTS THIS PERIOD (From Line 16) | | \$ | 131,706 | 24 |
| 25. SUBTOTAL (Add Line 23 and Line 24) | | \$ | 335,751 | 25 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) | | \$ | 112,835 | 26 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) | | \$ | 197,598 | 27 |

84020142272

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code
 Mr. Charles R. Simpson, III
 3604 Basswood Lane

Louisville, KY 40207

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

05-21-84

Amount of Each
Receipt this Period

250.00

Occupation
Attorney

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code
 Mr. Mark Wood Turner
 3888 Leestown Road

Lexington, KY 40511

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Transylvania Univ.

Date (month,
day, year)

06-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

Professor

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code
 Mr. Charles J. Wyly, Jr.
 800 Campbell Centre
 8350 N. Central Expressway
 Dallas, TX 75206

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

self-employed

Date (month,
day, year)

05-14-84

Amount of Each
Receipt This Period

500.00

Occupation

private investor

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code
 Mr. Ralph A. Homan
 104 Elm Street

Lawrenceburg, KY 40342

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

05-15-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

750.00

E. Full Name, Mailing Address and ZIP Code
 Mr. Neil Huffman
 7501 Hunting Creek Drive

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self Employed

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

100.00

Occupation

Auto Dealer

Aggregate Year-to-Date-\$

500.00

In-Kind
Campaign Car

F. Full Name, Mailing Address and ZIP Code
 Mr. Wilbur Kelly
 P. O. Box 18400

Erlanger, KY 41018

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

05-23-84

Amount of Each
Receipt This Period

150.00

Occupation

Retired

Aggregate Year-to-Date-\$

350.00

G. Full Name, Mailing Address and ZIP Code
 Mrs. Molly A. Leonard
 2915 Portland Avenue

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Jefferson County

Date (month,
day, year)

05-28-84

Amount of Each
Receipt This Period

175.00

Occupation

Community Liason

Aggregate Year-to-Date-\$

1025.00

SUBTOTAL of Receipts This Page (optional)

2425.00

TOTAL This Period (last page this line number only)

84020142273

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 14 for
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(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---------------------------------------|--|------------------------------------|
| Mr. Roger Milliken Milliken & Company, Inc. P. O. Box 3167 Spartanburg, SC 29304 | Milliken & Co., Inc. | 06-18-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman/CEO | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Ms. Deborah A. Patterson 10000 Shelbyville Road Suite 100 Anchorage, KY 40223 | self-employed | 05-11-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation business woman | Aggregate Year-to-Date-\$ 2000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mrs. Clare C. Simpson 3604 Basswood Lane Louisville, KY 40207 | self employed | 05-21-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Patricia Dabney 399 1/2 Mockingbird Valley Road Louisville, KY 40207 | self | 05-18-84 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 300.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. S. Gwathmey Tyler, III 1500 Walnut Lane Louisville, KY 40223 | Reager-Harris Company | 05-21-84 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Insurance Broker | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Ardene Flahavin 7111 Tophill Dallas, TX 75248 | self | 05-25-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation housewife | Aggregate Year-to-Date-\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Ralph A. Homan 104 Elm Street Lawrenceburg, KY 40342 | none | 06-07-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 750.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4300.00 |
| TOTAL This Period (last page this line number only) | | | |

84020142274

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
15025 Bircham Road
Louisville, KY 40243

Name of Employer

Copy Corporation

Date (month,
day, year)
05-29-84

Amount of Each
Receipt this Period
\$175.00

Occupation

Owner

Inkind-Office Equipment

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 875.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Sandra Linker
7229 Heatherly Square
Louisville, KY 40222

Name of Employer

none

Date (month,
day, year)
06-08-84

Amount of Each
Receipt This Period
1000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert Moss
Route 2
Columbia, KY 42728

Name of Employer
Self

Date (month,
day, year)
06-04-84

Amount of Each
Receipt This Period
\$500.00

Occupation

Oil Producer

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Deborah A. Patterson
10000 Shelbyville Road
Suite 100
Anchorage, KY 40223

Name of Employer
self-employed

Date (month,
day, year)
05-11-84

Amount of Each
Receipt This Period
\$1000.00

Occupation

businesswoman

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 2000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Paul M. Stafford
499 Church Street
Paintsville, KY 41240

Name of Employer
none

Date (month,
day, year)
05-23-84

Amount of Each
Receipt This Period
\$100.00

Occupation

retired

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 225.00

F. Full Name, Mailing Address and ZIP Code

Mr. Bernard A. Dahlem
604 Briar Hill Road
Louisville, KY 40206

Name of Employer
Dahlem Construction Co.

Date (month,
day, year)
06-06-84

Amount of Each
Receipt This Period
\$250.00

Occupation

Construction

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

\$3025.00

TOTAL This Period (last page this line number only)

84020142275

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. James S. Welch
2001 Rose Island Road

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

06-01-84

Amount of Each
Receipt this Period

300.00

Occupation

housewife

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Shelly Frank
P. O. Box 32338

Louisville, KY 40232

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Chi-Chi's Restaurants, Inc.

Date (month,
day, year)

05-14-84

Amount of Each
Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gordon H. Hood
142 Park Rd.

Ft. Mitchell, KY 41011

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Heckerman & Hood

Date (month,
day, year)

05-30-84

Amount of Each
Receipt This Period

300.00

Occupation

lawyer

Aggregate Year-to-Date-\$

300.00

D. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
15025 Bircham Road

Louisville, KY 40243

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Copy Corporation

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

175.00

Occupation

owner

Aggregate Year-to-Date-\$

875.00

In-Kind
Office Equipment

E. Full Name, Mailing Address and ZIP Code

Mr. Harry Lucas, Jr.
P. O. Box 56467

Houston, TX 77256

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

05-17-84

Amount of Each
Receipt This Period

500.00

Occupation

investments

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Dr. Antoine S. Munther
Dowell Road

Russell Springs, KY 42642

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

05-24-84

Amount of Each
Receipt This Period

200.00

Occupation

Surgeon

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. James A. Patterson, II
10000 Shelbyville Road, Ste 100

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

businessman

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2975.00

TOTAL This Period (last page this line number only)

84020142276

SCHEDULE A

ITEMIZED RECEIPTS

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| | | | |
|---|--|---|--|
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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Jack Ragle Graham Grain Company 200 Voorhees Terre Haute, IN 47802 | | Name of Employer Graham Grain Company | Date (month, day, year) 06-18-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President | Amount of Each Receipt this Period 1000.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Russell Badgett, Jr. Twin Oaks Madisonville, KY 42431 | | Name of Employer self | Date (month, day, year) 05-22-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Mining Engineer | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ 650.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Paul M. Stafford 499 Church Street Paintsville, KY 41240 | | Name of Employer none | Date (month, day, year) 06-25-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Retired | Amount of Each Receipt This Period 75.00 |
| | | Aggregate Year-to-Date-\$ 225.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Barbara J. Davis 4904 Cooper Chapel Rd. Louisville, KY 40229 | | Name of Employer self | Date (month, day, year) 05-29-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation photographer | Amount of Each Receipt This Period 150.00 |
| | | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Richard White P. O. Box 546 Morehead, KY 40351 | | Name of Employer self-employed | Date (month, day, year) 05-14-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation businesswoman | Amount of Each Receipt This Period 400.00 |
| | | Aggregate Year-to-Date-\$ 400.00 | |
| F. Full Name, Mailing Address and ZIP Code Dr. Daniel P. Garcia 1714 Dundee Way Louisville, KY 40205 | | Name of Employer Self | Date (month, day, year) 06-07-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Doctor | Amount of Each Receipt This Period 312.50 |
| | | Aggregate Year-to-Date-\$ 625.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. J. Seaton Huff 5737 South Watterson Trail Louisville, KY 40291 | | Name of Employer retired | Date (month, day, year) 06-13-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation none | Amount of Each Receipt This Period 500.00 |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2687.50 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. William Kirkland
1203 Pradero
P. O. Box 256
Frankfort, KY 40601

Name of Employer

Self

Date (month,
day, year)

06-04-84

Amount of Each
Receipt this Period

1000.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date-\$

2000.00

B. Full Name, Mailing Address and ZIP Code

Mr. William F. Lucas
18 Indian Hills Trail

Name of Employer

none

Date (month,
day, year)

06-25-84

Amount of Each
Receipt This Period

500.00

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Robert McLean Nash
Covered Bridge Road

Name of Employer

self

Date (month,
day, year)

05-18-84

Amount of Each
Receipt This Period

500.00

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Sharon K. Patterson
10000 Shelbyville Road
Suite 100

Name of Employer

Jeff. Co. Bd. of Ed.

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

school teacher

Aggregate Year-to-Date-\$

2000.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Edith Ray
Route 3, Box 142

Name of Employer

Self

Date (month,
day, year)

05-22-84

Amount of Each
Receipt This Period

250.00

Vine Grove, KY 40175

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Housewife

Aggregate Year-to-Date-\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Bernard H. Barnett
249 Royal Palm Way

Name of Employer

Barnett & Alagia

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

1000.00

Palm Beach, FL 33480

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Charles Stuber
Route 1, Box 144

Name of Employer

Appalachian Computer

Date (month,
day, year)

05-14-84

Amount of Each
Receipt This Period

400.00

London, KY 40741

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Director

Aggregate Year-to-Date-\$

400.00

SUBTOTAL of Receipts This Page (optional)

4650.00

TOTAL This Period (last page this line number only)

84020142278

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Mark B. Davis, Jr.
450 Swing Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
day, year)

06-28-84

Amount of Each
Receipt This Period

1000.00

Occupation

Attorney

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Kenneth Williams
493 West Street
P. O. Box 807
Paintsville, KY 41240

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

K-P Enterprises

Date (month,
day, year)

05-14-84

Amount of Each
Receipt This Period

250.00

Occupation

owner

Aggregate Year-to-Date-\$

275.00

C. Full Name, Mailing Address and ZIP Code

Mr. Rudy Gernert
1859 Woodfill Way

Louisville, KY 40205

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Mary A. Huff
6003 Glen Hill Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

06-06-84

Amount of Each
Receipt This Period

1000.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Ms. Sharon K. Patterson
10000 Shelbyville Road
Suite 100
Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jeff. Co. Bd. of Ed.

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

school teacher

Aggregate Year-to-Date-\$

2000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Charles D. Barnett
249 Royal Palm Way

Palm Beach, FL 33480

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Barnett & Alagia

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

1000.00

Occupation

Attorney

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. James H. Taylor
7909 White Cedar Place

Louisville, KY 40219

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

06-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

84020142279

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau
06-05-84

Occupation

Information Clerk

Aggregate Year-to-Date-\$ 305.00

Date (month,
day, year)

Amount of Each
Receipt this Period

100.00

B. Full Name, Mailing Address and ZIP Code

Mr. Thomas Lyle Williams, III
P. O. Box 1577

Thomasville, GA 31799

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

investments

Aggregate Year-to-Date-\$ 1000.00

Date (month,
day, year)

06-18-84

Amount of Each
Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert M. Gintel
Equity Advisors, Inc.
Greenwich Office Park, OP-6
Greenwich, CT 06830

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

investment advisor

Aggregate Year-to-Date-\$ 250.00

Date (month,
day, year)

06-18-84

Amount of Each
Receipt This Period

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Dow Huffman
211 Sycamore Drive

Anchorage, KY 40223

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self-employed

Occupation

businessman

Aggregate Year-to-Date-\$ 2000.00

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Vernon E. Hux
Tri-Industries, Inc.
951 Sycamore Street
Terre Haute, IN 47807

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Tri-Industries, Inc.

Occupation

president

Aggregate Year-to-Date-\$ 1000.00

Date (month,
day, year)

06-18-84

Amount of Each
Receipt This Period

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. J. Royden Peabody, Jr.
6401 Transylvania Ave.

Harrods Creek, KY 40027

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Occupation

Volunteer

Aggregate Year-to-Date-\$ 500.00

Date (month,
day, year)

06-05-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. John W. Rollins
P. O. Box 1026

Wilmington, DE 19899

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

RLC Corporation

Occupation

Chairman of the Board

Aggregate Year-to-Date-\$ 1000.00

Date (month,
day, year)

06-30-84

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4850.00

TOTAL This Period (last page this line number only)

84020142280

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code
Mrs. Margerite C. Bickel
4010 Lime Kiln Lane

Louisville, KY 40222

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self employed

Occupation

Homemaker

Date (month,
day, year)

05-14-84

Amount of Each
Receipt this Period

500.00

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code
Mr. James H. Taylor
7909 White Cedar Place

Louisville, KY 40219

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lichtefeld-Mazzaro

Occupation

superintendent

Date (month,
day, year)

06-11-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code
Dr. Robert E. Windom
1562 South Drive

Sarasota, FL 33579

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self

Occupation

doctor

Date (month,
day, year)

05-25-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code
Mr. Sloane Graff, Jr.
3900 Barbour Ln.
Box 22311
Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Occupation

retired

Date (month,
day, year)

06-25-84

Amount of Each
Receipt This Period

200.00

Aggregate Year-to-Date-\$

230.00

E. Full Name, Mailing Address and ZIP Code
Mr. Dow Huffman
211 Sycamore Drive

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self-employed

Occupation

businessman

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

2000.00

F. Full Name, Mailing Address and ZIP Code
Miss Kate Ireland

Wendover, KY 41775

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Frontier Nursing Service

Occupation

Director

Date (month,
day, year)

06-20-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code
Mr. Edward N. McDevitt
105 Chipping Way

Louisville, KY 40222

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jeff. Co. Works.

Occupation

Fleet Coordinator

Date (month,
day, year)

05-17-84

Amount of Each
Receipt This Period

50.00

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

84020142281

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1 (a)
(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Frederick G. Neikirk
104 College Street

Somerset, KY 42501

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

05-21-84

Amount of Each
Receipt this Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Oscar Penn

Route 6

Newton Pike

Lexington, KY 40511

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Penn Bros. Tobacco

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

Owner

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Dr. C. William Briscoe

Rt 2, Box 307-C Fern Hill

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

06-11-84

Amount of Each
Receipt This Period

50.00

Occupation

M.D.

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mr. David F. Dorn

Forest Oil Company

950 17th Street, Suite 1500

Denver, CO 80202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Forest Oil Company

Date (month,
day, year)

06-18-84

Amount of Each
Receipt This Period

1000.00

Occupation

President

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Dalton J. Woods

505 American Towers

Shreveport, LA 71101

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

05-25-84

Amount of Each
Receipt This Period

1000.00

Occupation

Ind. Gas & Oil Producer

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Kip Huffman

8000 Weyanoke Court

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

car dealership

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

general manager

Aggregate Year-to-Date-\$ 2000.00

G. Full Name, Mailing Address and ZIP Code

Mr. David A. Jones

P.O. Box 1438

Louisville, KY 40201

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Humana

Date (month,
day, year)

05-22-84

Amount of Each
Receipt This Period

1000.00

Occupation

Executive

Aggregate Year-to-Date-\$ 1000.00

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

84020142282

SCHEDULE A

ITEMIZED RECEIPTS

Page 11 of 14 for
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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Gene LaCroix 1700 Park Shore Road La Grange, KY 40031 | self | 06-04-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Arabian Horse Breeder & Trainer | Aggregate Year-to-Date-\$ | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Edward N. McDevitt 105 Chipping Way Louisville, KY 40222 | Jeff. Co. Works. | 05-18-84 | 300.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Fleet Coordinator | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. David S. Nightingale 401 Jarvis Lane Louisville, KY 40207 | Self Employed | 06-30-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ | 1000.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. George Peterkin, Jr. Kirby Exploration Company P. O. Box 1745 Houston, TX 77251 | Kirby Exploration Company | 06-18-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation president | Aggregate Year-to-Date-\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Elizabeth Hoerth Sego Wilwood Antiques P. O. Box 13 Fisherville, KY 40023 | Wilwood Antiques | 05-11-84 | 400.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ | 400.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Curtis E. Calder, Jr. POB 1020 Dallas, TX 75221 | Self employed | 06-15-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Oil and Gas Producer | Aggregate Year-to-Date-\$ | 250.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Charlotte A. Elam 10604 Sycamore Court Anchorage, KY 40223 | PATCO | 05-11-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation secretary | Aggregate Year-to-Date-\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 4950.00 |
| TOTAL This Period (last page this line number only) | | | |

04020142203

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|---|--|--|
| A. Full Name, Mailing Address and ZIP Code Ms. Bertha Wright Wright Ent. 301 E. Main Lexington, KY 40507 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Calumet Farm Occupation Horse Industry Aggregate Year-to-Date—\$ 1000.00 | Date (month, day, year) 05-24-84 | Amount of Each Receipt this Period 1000.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Kip Huffman 8000 Weyanoke Court Prospect, KY 40059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer car dealership Occupation general manager Aggregate Year-to-Date—\$ 2000.00 | Date (month, day, year) 05-11-84 | Amount of Each Receipt This Period 1000.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Albert S. Kellow 1603 Avenue Plaza Louisville, KY 40203 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer none Occupation retired Aggregate Year-to-Date—\$ 350.00 | Date (month, day, year) 05-22-84 | Amount of Each Receipt This Period 150.00 |
| D. Full Name, Mailing Address and ZIP Code Dr. Ralph Landau Listowel, Inc. Two Park Avenue, Suite 1525 New York, NY 10016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Listowle, Inc. Occupation Chemical Engineer Aggregate Year-to-Date—\$ 1000.00 | Date (month, day, year) 06-18-84 | Amount of Each Receipt This Period 1000.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Edward N. McDevitt 105 Chipping Way Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Jeff. Co. Works. Occupation Fleet Coordinator Aggregate Year-to-Date—\$ 500.00 | Date (month, day, year) 05-18-84 | Amount of Each Receipt This Period 50.00 |
| F. Full Name, Mailing Address and ZIP Code Mrs. Beatrice Carr Pickens P. O. Box 2009 Amarillo, TX 79189 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self Occupation homemaker Aggregate Year-to-Date—\$ 1000.00 | Date (month, day, year) 06-30-84 | Amount of Each Receipt This Period 1000.00 |
| G. Full Name, Mailing Address and ZIP Code Mrs. Catherine M. Shallcross 1816 Bainbridge Row Drive Louisville, KY 40222 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self Occupation homemaker Aggregate Year-to-Date—\$ 250.00 | Date (month, day, year) 05-24-84 | Amount of Each Receipt This Period 150.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 4350.00 |
| TOTAL This Period (last page this line number only) | | | |

04020142284

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Dr. Edward L. Callahan
 2003 Rio Vista**

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

06-22-84

Amount of Each
Receipt this Period

200.00

Occupation

Pathologist

Aggregate Year-to-Date—\$

400.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Matthew Toeppen
 2536 Hazelwood Dr.**

Crescent Spring, KY 41017

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

05-11-84

Amount of Each
Receipt This Period

400.00

Occupation

Builder

Aggregate Year-to-Date—\$

400.00

C. Full Name, Mailing Address and ZIP Code

**Mr. F. Evans Farwell
 5824 St. Charles Avenue**

New Orleans, LA 70115

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

executive

Date (month,
day, year)

05-21-84

Amount of Each
Receipt This Period

1000.00

Occupation

retired

Aggregate Year-to-Date—\$

1000.00

D. Full Name, Mailing Address and ZIP Code

**Mr. George L. Wright
 Route 7, Box 653**

Russell Springs, KY 42642

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

06-25-84

Amount of Each
Receipt This Period

100.00

Occupation

Retired

Aggregate Year-to-Date—\$

300.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Neil Huffman
 7501 Hunting Creek Drive**

Prospect, KY 40059

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self Employed

Date (month,
day, year)

05-29-84

Amount of Each
Receipt This Period

100.00

Occupation

Auto Dealer

Aggregate Year-to-Date—\$

500.00

**In-Kind
 Campaign Car**

F. Full Name, Mailing Address and ZIP Code

**Mr. Albert S. Kellow
 1603 Avenue Plaza**

Louisville, KY 40203

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

06-22-84

Amount of Each
Receipt This Period

100.00

Occupation

retired

Aggregate Year-to-Date—\$

350.00

G. Full Name, Mailing Address and ZIP Code

**Mrs. Molly A. Leonard
 2915 Portland Avenue**

Louisville, KY 40212

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Jefferson County

Date (month,
day, year)

05-23-84

Amount of Each
Receipt This Period

825.00

Occupation

Community Liason

Aggregate Year-to-Date—\$

1025.00

SUBTOTAL of Receipts This Page (optional)

2725.00

TOTAL This Period (last page this line number only)

8:4020142285

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|-------------------------------------|-----------------------------------|------------------------------------|
| Mr. Jon T. Miho 190 S. King Street, #1500 Honolulu, HI 96813 | Fong & Miho | 05-25-84 | 150.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Richard R. Ohrstrom P. O. Box 325 Middleburg, VA 22117 | not provided | 05-25-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation investment | Aggregate Year-to-Date—\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. T. Boone Pickens, Jr. P. O. Box 2009 Amarillo, TX 79189 | Mesa Petroleum Co. | 06-30-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Alfred R. Shands, III 8909 Highway 329 Crestwood, KY 40014 | Information Requested | 06-15-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | 3150.00 |
| TOTAL This Period (last page this line number only) | | | \$55,387.50 |

84020142286

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 11(b)
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| | | | |
|---|--|---------------------------|------------------------------------|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Nat. Republican Senatorial Com. 404 C. Street, N.E. Washington, DC 20002 | | Name of Employer | Date (month, day, year) |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt this Period |
| | | Aggregate Year-to-Date-\$ | 2105.64 |
| B. Full Name, Mailing Address and ZIP Code Republican Party of Woodford Co. Ms. Elizabeth Short, Treasurer Route 1, Hedden Road Versailles, KY 40383 | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | 126.50 |
| C. Full Name, Mailing Address and ZIP Code Nat. Republican Senatorial Com. 404 C. Street, N.E. Washington, DC 20002 | | Name of Employer | Date (month, day, year) |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | 2105.64 |
| D. Full Name, Mailing Address and ZIP Code Grayson County Republican Women Mrs. Jo Ann Cottrell, Treasurer Leitchfield, KY 42754 | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | 367.50 |
| E. Full Name, Mailing Address and ZIP Code Harrison Co. Rep. Women's Club Mrs. Roberta N. Miner, Treasurer 220 Oddville Avenue Cynthiana, KY 41031 | | Name of Employer | Date (month, day, year) |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | 25.00 |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | 2062.14 |
| TOTAL This Period (last page this line number only) | | | 2062.14 |

84020142287

SCHEDULE A

ITEMIZED RECEIPTS

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|---|---------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 06-09-84 | 445.20 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | | In-Kind Reception #1 4492.77 |
| B. Full Name, Mailing Address and ZIP Code Hunt Oil Company PAC Mr. George McVay, Chairman 2900 Interfirst One Building Dallas, TX 75202 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | 06-21-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | | 500.00 |
| C. Full Name, Mailing Address and ZIP Code LIB-PAC Mr. Jack Guthrie P. O. Box 32500 Louisville, KY 40232 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | 05-11-84 | 1500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | | 3500.00 |
| D. Full Name, Mailing Address and ZIP Code Maytag Good Government Committee Mr. Donald C. Byers, Chairman The Maytag Company Newton, IA 50208 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | 05-30-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | | 500.00 |
| E. Full Name, Mailing Address and ZIP Code LIB-PAC Mr. Jack Guthrie P. O. Box 32500 Louisville, KY 40232 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | 06-06-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | | 3500.00 |
| F. Full Name, Mailing Address and ZIP Code Diamond Shamrock Vol. Pol. Cont. Mr. Robert E. Garbesi 717 N. Harwood Dallas, TX 75201 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | 06-21-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code LIB-PAC Mr. Jack Guthrie P. O. Box 32500 Louisville, KY 40232 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | Occupation | 06-20-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date-\$ | | 3500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 5945.20 |
| TOTAL This Period (last page this line number only) | | | |

84020143288

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 3 for
 LINE NUMBER 11 (c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| | | | |
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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Cooper Industries PAC Mr. Alan J. Hill P. O. Box 4446 Houston, TX 77210 | | Name of Employer Occupation | Date (month, day, year) 06-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt this Period 2500.00 | |
| | | Aggregate Year-to-Date-\$ 2500.00 | |
| B. Full Name, Mailing Address and ZIP Code First KY National Corp. PAC Mr. Steve Miles P. O. Box 1019 Louisville, KY 40201 | | Name of Employer Occupation | Date (month, day, year) 05-11-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period 1000.00 | |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Prudential PAC Prudential Plaza Newark, NJ 07101 | | Name of Employer Occupation | Date (month, day, year) 05-21-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period 1000.00 | |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Allis-Chalmers Voluntary PCF Mr. R. A. Edwards, Jr., V. P. P. O. Box 512 Milwaukee, WI 53201 | | Name of Employer Occupation | Date (month, day, year) 06-14-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period 500.00 | |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code R.P.A.C. Mr. Jack Carlson 430 North Michigan Avenue Chicago, IL 60611 | | Name of Employer Occupation | Date (month, day, year) 05-21-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period 3000.00 | |
| | | Aggregate Year-to-Date-\$ 3000.00 | |
| F. Full Name, Mailing Address and ZIP Code BUILD PAC Mr. Allen Valentine, Treasurer P. O. Box 50801 Dallas, TX 75250 | | Name of Employer Occupation | Date (month, day, year) 05-30-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period 500.00 | |
| | | Aggregate Year-to-Date-\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Hunt Committee for Sound Gov. 2400 Thanksgiving Tower Dallas, TX 75201 | | Name of Employer Occupation | Date (month, day, year) 05-16-84 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period 20.76 | |
| | | In-Kind Postage | |
| | | Aggregate Year-to-Date-\$ 4492.77 | |
| SUBTOTAL of Receipts This Page (optional) | | | 8520.76 |
| TOTAL This Period (last page this line number only) | | | |

0402014289

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 3 for
 LINE NUMBER 11(c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any Information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---------------------------|-------------------------|------------------------------------|
| SUN PAC Mr. David W. Twomey, Adm. Dir. 100 Matsonford Road Radnor, PA 19087 | | 06-11-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Tenneco Employees Good Govt. Fund Mr. J. S. Brogdon, Jr. P. O. Box 2511 Houston, TX 77001 | | 05-29-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| The Republican Majority Fund Senator Howard H. Baker, Jr. 227 MA Avenue, N.E. #220 Washington, DC 20002 | | 06-25-84 | 5000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 5000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| HOUPAC Mr. Jack M. Webb P. O. Box 27497 Houston, TX 77027 | | 06-15-84 | 4000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 5000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Non Partisan Political Sup.Com. Mr. Joseph H. Kehlbeck, Manager MA Material Resource Operation GE AppParkLouisville, KY 40225 | | 05-14-84 | 50.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 50.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | | |
| SUBTOTAL of Receipts This Page (optional) | | | 11050.00 |
| TOTAL This Period (last page this line number only) | | | 25515.96 |

84020142290

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 13 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Judge A. Mitchell McConnell, Jr.
 3 Gardiner Court

Louisville, KY 40205

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

05-14-84

Amount of Each
Receipt this Period

25000.00

Occupation

Aggregate Year-to-Date—\$ 25000.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

25000.00

TOTAL This Period (last page this line number only)

25000.00

8402014291

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| | | | |
|---|--|---|--|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) <u>McConnell Senate Committee</u> | | | |
| A. Full Name, Mailing Address and ZIP Code Liberty National Bank 416 West Jefferson Street Louisville, KY 40202 | | Name of Employer Occupation | Date (month, day, year) Monthly May & June |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on investment</u> | | Amount of Each Receipt this Period \$1,459 | |
| | | Aggregate Year-to-Date—\$ <u>7,059</u> | |
| B. Full Name, Mailing Address and ZIP Code Bank of Louisville 500 West Broadway Louisville, KY 40202 | | Name of Employer Occupation | Date (month, day, year) Monthly May & June |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Interest on Investment</u> | | Amount of Each Receipt This Period 32 | |
| | | Aggregate Year-to-Date—\$ <u>491</u> | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period | |
| | | Aggregate Year-to-Date—\$ | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period | |
| | | Aggregate Year-to-Date—\$ | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period | |
| | | Aggregate Year-to-Date—\$ | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period | |
| | | Aggregate Year-to-Date—\$ | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Amount of Each Receipt This Period | |
| | | Aggregate Year-to-Date—\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | \$1,491 |
| TOTAL This Period (last page this line number only) | | | \$1,491 |

84020142292

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 11 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 1 of 11

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Bank of Louisville 500 W. Broadway Louisville, KY 40202 | Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-15-84 | 3119.79 |
| Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194 | Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-20-84 | 12.50 |
| K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Airplane Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-19-84 | 1187.75 |
| Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-29-84 | 788.98 |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-19-84 | 320.28 |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-15-84 | 502.16 |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-23-84 | 985.04 |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-15-84 | 1179.89 |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-29-84 | 100.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 8196.39 |
| TOTAL This Period (last page this line number only) | | | |

84020142293

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

LINE NUMBER 17
(Use separate schedule(s) for each category of the Detailed Summary Page)
Page 2 of 2

| | | | |
|---|--|--|---|
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee | | | |
| Name of Committee (in full) McCommer Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222 | Purpose of Disbursement Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-23-84 | Amount of Each Disbursement This Period 378.00 |
| B. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, 433 East Market Street Louisville, KY 40202 | Purpose of Disbursement InOffice Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-19-84 | Amount of Each Disbursement This Period 84.00 |
| C. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194 | Purpose of Disbursement Delivery Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-22-84 | Amount of Each Disbursement This Period 24.00 |
| D. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-29-84 | Amount of Each Disbursement This Period 195.38 |
| E. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-15-84 | Amount of Each Disbursement This Period 759.08 |
| F. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Contract Labor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-16-84 | Amount of Each Disbursement This Period 296.45 |
| G. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-29-84 | Amount of Each Disbursement This Period 502.16 |
| H. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-23-84 | Amount of Each Disbursement This Period 791.70 |
| I. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 6-29-84 | Amount of Each Disbursement This Period \$1142.43 |
| SUBTOTAL of Disbursements This Page (optional) | | | 4173.20 |
| TOTAL This Period (Use page this line number only) | | | |

84020142294

SCHEDULE B

ITEMIZED DISBURSEMENTS

LINE NUMBER 77

(Use separate schedule(s) for each category of the Detailed Summary Page)

Line: 17

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|--|--|-------------------------------------|--|
| Name of Committee (in Full): McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-29-84 | Amount of Each Disbursement This Period 300.00 |
| B. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-14-84 | Amount of Each Disbursement This Period 1965.60 |
| C. Full Name, Mailing Address and ZIP Code Cybernetics & Systems, Inc. 500 Water Street Jacksonville, FL 32202 | Purpose of Disbursement Computer Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-22-84 | Amount of Each Disbursement This Period 322.37 |
| D. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194 | Purpose of Disbursement Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-22-84 | Amount of Each Disbursement This Period 24.00 |
| E. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-15-84 | Amount of Each Disbursement This Period 390.76 |
| F. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-29-84 | Amount of Each Disbursement This Period 788.98 |
| G. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-22-84 | Amount of Each Disbursement This Period 294.00 |
| H. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-15-84 | Amount of Each Disbursement This Period 2024.69 |
| I. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32240 Louisville, KY 40232 | Purpose of Disbursement phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-19-84 | Amount of Each Disbursement This Period 834.60 |
| SUBTOTAL of Disbursements This Page (optional) | | | 6945.00 |
| TOTAL This Period (Use only this line number only) | | | |

84020142295

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER 17
(Use separate schedule(s) for each
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Summary Page)

McConnell Senate Committee

Line: 17

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any Political committee to solicit contributions from such committee.

Name of Committee (in Full):

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 1121.72 |
| B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-11-84 | 2000.00 |
| C. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-19-84 | 735.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-29-84 | 194.18 |
| E. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-07-84 | 256.00 |
| F. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 390.76 |
| G. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-15-84 | 1061.69 |
| H. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Contract Labor Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 127.05 |
| I. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-23-84 | 2024.69 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7911.09 |
| TOTAL This Period (last page this line number only) | | | |

84020142296

SCHEDULE B

ITEMIZED DISBURSEMENTS

LINE NUMBER **17**
(Use separate schedule(s) for each category of the Detailed Summary Page)

Line: 17

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| | | | |
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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full): McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-22-84 | Amount of Each Disbursement This Period 109.05 |
| B. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-21-84 | Amount of Each Disbursement This Period 128.80 |
| C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-17-84 | Amount of Each Disbursement This Period 200.00 |
| D. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-15-84 | Amount of Each Disbursement This Period 5800.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-15-84 | Amount of Each Disbursement This Period 363.90 |
| F. Full Name, Mailing Address and ZIP Code Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-29-84 | Amount of Each Disbursement This Period 275.38 |
| G. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-29-84 | Amount of Each Disbursement This Period 21.44 |
| H. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-29-84 | Amount of Each Disbursement This Period 1061.69 |
| I. Full Name, Mailing Address and ZIP Code Performance Business Forms P.O. Box 100770 Nashville, TN 37210 | Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-22-84 | Amount of Each Disbursement This Period 2.10 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7962.36 |
| TOTAL This Period (last page this line number only) | | | |

84020142297

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 16 of 11 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full): McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233 | Purpose of Disbursement Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-19-84 | Amount of Each Disbursement This Period 270.00 |
| B. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254 | Purpose of Disbursement Long Distance Calls Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-23-84 | Amount of Each Disbursement This Period 765.49 |
| C. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-29-84 | Amount of Each Disbursement This Period 184.53 |
| D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-18-84 | Amount of Each Disbursement This Period 30.50 |
| E. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Purpose of Disbursement Media Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-15-84 | Amount of Each Disbursement This Period 1373.93 |
| F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-15-84 | Amount of Each Disbursement This Period 84.11 |
| G. Full Name, Mailing Address and ZIP Code Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-15-84 | Amount of Each Disbursement This Period 275.38 |
| H. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 05-15-84 | Amount of Each Disbursement This Period 1061.69 |
| I. Full Name, Mailing Address and ZIP Code Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233 | Purpose of Disbursement Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 06-22-84 | Amount of Each Disbursement This Period 347.97 |
| SUBTOTAL of Disbursements This Page (optional) | | | 4393.60 |
| TOTAL This Period (last page this line number only) | | | |

84020142298

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 7 of 11 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|---|-------------------------|---|
| Name of Committee (in Full): | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Quality Inn-Riverview | Room Rental | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-11-84 | 75.00 |
| Covington, KY 41000 | | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Sprint | Long Distance Calls | | |
| Accounts Receivable Dept. | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-19-84 | 863.93 |
| Pittsburg, PA 15254 | | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle | Salary | | |
| 2215 Talbott Ave. | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 415.47 |
| Louisville, KY 40205 | | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster | Postage | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-27-84 | 174.72 |
| Louisville, KY 40201 | | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc. | Media | | |
| 456 West 43rd Street | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-23-84 | 5800.00 |
| New York, NY 10036 | | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack | Travel Reimbursement | | |
| 3201 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-17-84 | 100.27 |
| Leith Lane, Apt 715 | | | |
| Louisville, KY 40218 | | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Mary Gabriel Harpring | Salary | | |
| 3610 Glencreek Lane | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 275.38 |
| Louisville, KY 40218 | | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Liberty National Bank | Payroll Taxes | | |
| P.O. Box 32500 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 4275.24 |
| Louisville, KY 40232 | | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janet Mullins | Salary | | |
| 1249 Everett Ave. | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 1061.69 |
| Louisville, KY 40204 | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 13041.70 |
| TOTAL This Period (last page this line number only) | | | |

84020142299

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 8 of 11 for
LINE NUMBER 17
 (Use separate schedule(s) for each
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 Summary Page)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full):
McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-14-84 | 48343.71 |
| Quality Inn-Riverview Covington, KY 41000 | Room Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-30-84 | 75.00 |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-15-84 | 449.88 |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-06-84 | 500.00 |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-29-84 | 217.08 |
| Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 363.90 |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-15-84 | 502.16 |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-29-84 | 449.88 |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-06-84 | 500.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 51401.61 |
| TOTAL This Period (last page this line number only) | | | |

84020142300

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 9 of 11 for
LINE NUMBER 17
 (Use separate schedule(s) for each
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 Summary Page)

Line: 17

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|---|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-15-84 | 434.15 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack 3201 Leith Lane, Apt 715 Louisville, KY 40218 | Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-18-84 | 93.69 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-22-84 | 1178.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202 | Airplane Ticket Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-22-84 | 328.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Furniture Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-19-84 | 285.86 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-21-84 | 175.50 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-15-84 | 449.88 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | P. O. Box Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-19-84 | 26.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 434.15 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3405.23 |
| TOTAL This Period (last page this line number only) | | | |

84020142301

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 10 of 11 for
LINE NUMBER 15
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Line: 17

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|--|---|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Airplane Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-17-84 | 655.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-15-84 | 788.98 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-18-84 | 169.40 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-29-84 | 502.16 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-23-84 | 105.16 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 449.88 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-27-84 | 174.72 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | In-Kind Campaign Car Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 05-29-84 | 100.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | In-Kind Campaign Car Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 06-30-84 | 100.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3045.30 |
| TOTAL This Period (last page this line number only) | | | |

84020142302

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
LINE NUMBER 19 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Judge A. Mitchell McConnell, Jr. 3 Gardiner Court Louisville, KY 40205 | Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Loan Repayment</u> | Date (month, day, year) 06-04-84 | Amount of Each Disbursement This Period \$25,000 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 25,000 |
| TOTAL This Period (last page this line number only) | | | \$25,000 |

84020142304

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (In Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| <u>McConnell Senate Committee</u> | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor <u>Ailes Communications</u> <u>456 West 43rd Street</u> <u>New York, NY 10036</u> | <u>36,174</u> | | <u>12,974</u> | <u>23,200</u> |
| Nature of Debt (Purpose): <u>Communications training</u> | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor <u>ABC Printing Company</u> <u>3520 College Drive</u> <u>Jeffersontown, KY 40299</u> | <u>4,223</u> | <u>735</u> | <u>2,701</u> | <u>2,257</u> |
| Nature of Debt (Purpose): <u>Printing</u> | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor <u>Sprint</u> <u>Accounts Receivable Department</u> <u>Pittsburgh, PA 15254</u> | | <u>2,386</u> | <u>1,629</u> | <u>757</u> |
| Nature of Debt (Purpose): <u>Long Distance Telephone Charges</u> | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor <u>South Central Bell</u> <u>P. O. Box 32440</u> <u>Louisville, KY 40232</u> | <u>1,882</u> | <u>2,314</u> | <u>2,826</u> | <u>1,370</u> |
| Nature of Debt (Purpose): <u>telephone service</u> | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor <u>Palm Beach Plaza Center Assoc.</u> <u>1941 Bishop Lane, Suite 406</u> <u>Louisville, KY 40218</u> | <u>14,173</u> | | <u>4,050</u> | <u>10,123</u> |
| Nature of Debt (Purpose): <u>office rent</u> | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor <u>Datapoint Corporation</u> <u>P. J. Box 84490</u> <u>Dallas, TX 75284</u> | <u>3,394</u> | <u>2,414</u> | | <u>5,808</u> |
| Nature of Debt (Purpose): <u>computer equipment</u> | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | <u>43,515</u> |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

84020142305

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| <u>McConnell Senate Committee</u> | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| K. S. Air, Inc. P. O. Box 7183 Louisville, KY 40207 | 655 | 3,295 | 3,021 | 929 |
| Nature of Debt (Purpose): Airplane rental | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| Pitney Bowes 1901 Embassy Square Louisville, KY 40299 | 718 | | 270 | 448 |
| Nature of Debt (Purpose): office equipment rental | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| Pitney Bowes Credit Corporation P. O. Box 38460 Louisville, KY 40233 | 2,088 | | 348 | 1,740 |
| Nature of Debt (Purpose): office equipment rental | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206 | 908 | | 908 (to page 3) | |
| Nature of Debt (Purpose): Airplane Tickets | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| AT & T Information Systems 9300 Shelbyville Road, Suite 300 Louisville, KY 40222 | | 1,121 | 378 | 743 |
| Nature of Debt (Purpose): phones | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299 | | 634 | | 634 |
| Nature of Debt (Purpose): studio taping | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 4,494 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

84020142306

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

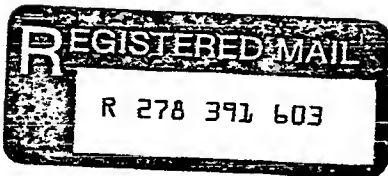
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| <u>McConnell Senate Committee</u> | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor: Copy Corporation 10420 Bluegrass Parkway Jeffersontown, KY 40299 | | 842 | | 842 |
| Nature of Debt (Purpose): <u>office supplies</u> | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor: Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | | 908 (from page 2) | | -908 |
| Nature of Debt (Purpose): <u>Airplane tickets</u> | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor: Sullivan Screen Print Company 3808 Fitzgerald Road Louisville, KY 40216 | | 2,009 | | 2,009 |
| Nature of Debt (Purpose): <u>Bumper stickers</u> | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| Nature of Debt (Purpose): | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| Nature of Debt (Purpose): | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor: | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 3,750 |
| 2) TOTAL This Period (last page this line only) | | | | 51,768 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

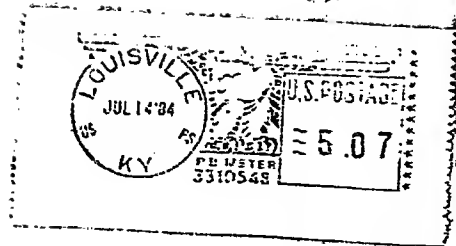
84020142307

84020142308

RETURN RECEIPT
REQUESTED



Secretary of Senate
119 D Street, N.E.
Washington, DC 20510



Registered Mail
Return receipt requested

WILLIAM F. HILDENBRAND
SECRETARY

ALICIA RAE FISHE
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20540
PHONE: 202-224-0100

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING REPORT WAS RECEIVED: _____

☒ CERTIFIED _____
☒ REGISTERED 7-14-84
☐ FEDERAL EXPRESS _____
☐ EXPRESS MAIL _____

84020142309



FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20541

NOV 6 1984 NO-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: July Quarterly Report (5/10/84-6/30/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

94033102287

Touche Ross & Co.

RECEIVED
OFFICE OF THE SENATE

NOV 16 1984

November 15, 1984

HAND DELIVERED

Secretary of the Senate
232 Hart Senate Office Building
Washington, D.C. 20510

Re: McConnell Senate Committee, FEC Identification No. C00155051
June 30, 1984 Quarterly Report

Gentlemen:

In accordance with the letter which we have received from the Federal Election Commission (a copy of which is attached), please be advised that the \$25,000 loan reflected on the above named report was from personal funds of the candidate, as defined by FEC regulations, as cited in the attached letter.

Please accept this as an amendment to the above described report.

Very truly yours,

Larry J. Steinberg

Larry J. Steinberg
Treasurer/McConnell Senate Committee

LJS:pmf

Attachment

cc: Robin Kelly



FEDERAL ELECTION COMMISSION
WASHINGTON DC 20463

NOV 6 1984 RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: July Quarterly Report (5/10/84-6/30/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

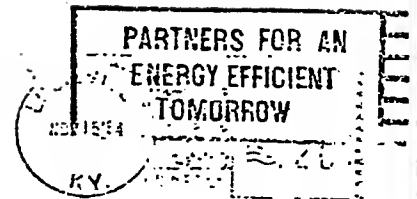
Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

8402026178

he Ross & Co.

510 West Broadway
Louisville, Kentucky 40202



Secretary of the Senate
232 Hart Senate Office Building
Washington, D.C. 20510



8402026137

UNITED STATES SENATE

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

PHONE 202-22

THE PRECEDING DOCUMENT (S) WAS:

☐ HAND DELIVERED
Date of Receipt

☐ INSIDE MAIL
Date of Receipt

☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS
Date of Receipt

☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION
Date Of Receipt

☐ FIRST CLASS MAIL POSTMARKED

☐ REGISTERED/CERTIFIED MAIL POSTMARK

☐ NO POSTMARK

☐ POSTMARK ILLEGIBLE

☒ OTHER POSTMARK Nov. 15, 1984

AND OR DATE OF RECEIPT

84020261380

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

| Name of Committee (in Full) | | Report Covering the Period: | | |
|---|---------|-------------------------------|-----------------------------------|--|
| McConnell Senate Committee | | From: July 1, 1984 | To: September 30, 1984 | |
| | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | |
| I. RECEIPTS | | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: | | | | |
| (a) Individuals/Persons Other Than Political Committees | 247,727 | 564,768 | 11 (a) | |
| (Memo Entry Unitemized \$ <u>98,197</u>) | | | | |
| (b) Political Party Committees | 3,220 | 6,896 | 11 (b) | |
| (c) Other Political Committees | 28,110 | 93,446 | 11 (c) | |
| (d) The Candidate | | | 11 (d) | |
| (e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)) | 279,057 | 665,110 | 11 (e) | |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | | |
| 13. LOANS: | | | | |
| (a) Made or Guaranteed by the Candidate | | 25,000 | 13 (a) | |
| (b) All Other Loans | | | 13 (b) | |
| (c) TOTAL LOANS (add 13 (a) and 13 (b)) | | 25,000 | 13 (c) | |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | | | |
| | 2 | 579 | 14 | |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | | | |
| | 4,147 | 11,707 | 15 | |
| 16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15) | | | | |
| | 283,206 | 702,396 | 16 | |
| II. DISBURSEMENTS | | | | |
| 17. OPERATING EXPENDITURES | | | | |
| | 363,314 | 950,099 | 17 | |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | | |
| 19. LOAN REPAYMENTS: | | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | 25,000 | 19 (a) | |
| (b) Of All Other Loans | | | 19 (b) | |
| (c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)) | | 25,000 | 19 (c) | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | | | |
| (a) Individuals/Persons Other Than Political Committees | 124 | 324 | 20 (a) | |
| (b) Political Party Committees | | | 20 (b) | |
| (c) Other Political Committees | 1,000 | 1,000 | 20 (c) | |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c)) | 1,124 | 1,324 | 20 (d) | |
| 21. OTHER DISBURSEMENTS | | | | |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21) | | | | |
| | 364,438 | 976,423 | 22 | |
| III. CASH SUMMARY | | | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | | | | |
| | \$ | 197,598 | 23 | |
| 24. TOTAL RECEIPTS THIS PERIOD (From Line 16) | | | | |
| | \$ | 283,206 | 24 | |
| 25. SUBTOTAL (Add Line 23 and Line 24) | | | | |
| | \$ | 480,804 | 25 | |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) | | | | |
| | \$ | 364,438 | 26 | |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) | | | | |
| | \$ | 116,366 | 27 | |

84020191023

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (In Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Ailes Communications 456 West 43rd Street New York, NY 10036 | 23,200 | | 17,400 | 5,800 |
| Nature of Debt (Purpose): Communications training | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| ABC Printing Company 3520 College Drive Jeffersontown, KY 40299 | 2,257 | 1,757 | 2,769 | 1,245 |
| Nature of Debt (Purpose): Printing | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Sprint Accounts Receivable Department Pittsburgh, PA 15254 | 757 | | 757 | |
| Nature of Debt (Purpose): Long Distance telephone charges | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| South Central Bell P. O. Box 32440 Louisville, KY 40232 | 1,370 | 7,582 | 7,509 | 1,443 |
| Nature of Debt (Purpose): Telephone service | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | 10,123 | | 6,074 | 4,049 |
| Nature of Debt (Purpose): Office rent | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Datapoint Corporation P. O. Box 93192 Chicago, Illinois 60673 | 5,808 | 7,389 | 8,399 | 4,798 |
| Nature of Debt (Purpose): Computer equipment | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | \$ 17,335 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

84020191024

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| K.S. Air, Inc. P. O. Box 7183 Louisville, KY 40207 | 929 | 4,705 | 4,474 | 1,160 |
| Nature of Debt (Purpose): Airplane rental | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Pitney Bowes 1901 Embassy Square Louisville, KY 40299 | 448 | | 329 | 119 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233 | 1,740 | | 1,392 | 348 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Americall Louisville 10000 Shelbyville Road Louisville, KY 40223 | | 1,090 | | 1,090 |
| Nature of Debt (Purpose): Long Distance Calls | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| AT & T Information Systems 9300 Shelbyville Road, Suite 300 Louisville, KY 40222 | 743 | | 743 | |
| Nature of Debt (Purpose): Phones | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299 | 634 | | 634 | |
| Nature of Debt (Purpose): studio taping | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | \$2,717 |
| 2) TOTAL This Period (last page this line only) | | | | \$. |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 3 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Copy Corporation 10420 Bluegrass Parkway Jeffersontown, KY 40299 | 842 | (494) (credit) | 348 | |
| Nature of Debt (Purpose): office supplies | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Judge Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | 908 | | | 908 |
| C. Nature of Debt (Purpose): Airplane Tickets | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Sullivan Screen Printing Company 3808 Fitzgerald Road Louisville, KY 40216 | 2,009 | | 2,009 | |
| D. Nature of Debt (Purpose): Bumper Stickers | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | | 1,941 | 1,436 | 505 |
| E. Nature of Debt (Purpose): office supplies | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116 | | 3,757 | 3,150 | 607 |
| F. Nature of Debt (Purpose): travel reimbursement | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| | | | | |
| G. Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | \$2,020 |
| 2) TOTAL This Period (last page this line only) | | | | \$22,072 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 11(a) of for
 LINE NUMBER
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Macdonell Senate Committee

| | | | |
|--|---|--|--|
| A. Full Name, Mailing Address and ZIP Code Mrs. Jeannette E. Donley 3007 Jarvis Woods Court Louisville, KY 40206 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Wm.M.Mercer/Meidinger Inc. Occupation Consultant Aggregate Year-to-Date—\$ 250.00 | Date (month, day, year) 09-30-84 | Amount of Each Receipt this Period 250.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. John H. Kerr, Jr. 124 South Ashland Lexington, KY 40502 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Kerr Brothers Funeral Home Occupation Funeral Director Aggregate Year-to-Date—\$ 557.50 | Date (month, day, year) 09-21-84 | Amount of Each Receipt This Period 500.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Charles R. Savidge, III Lakeside Otter Lake Estates Hanson, KY 42413 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer South Hopkins Coal Co. Occupation Coal Operator Aggregate Year-to-Date—\$ 1000.00 | Date (month, day, year) 09-06-84 | Amount of Each Receipt This Period 1000.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. Gerald B. Anderson 1429 Everett Ave., Apt. 3 Louisville, KY 40204 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Gibbs-Inman Co. Occupation Exec. V.P. Aggregate Year-to-Date—\$ 500.00 | Date (month, day, year) 09-14-84 | Amount of Each Receipt This Period 500.00 |
| E. Full Name, Mailing Address and ZIP Code Dr. Ernest A. Eggers 3719 Hillsdale Road Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Self Occupation Physician Aggregate Year-to-Date—\$ 1000.00 | Date (month, day, year) 09-25-84 | Amount of Each Receipt This Period 500.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Joseph E. Lambert P.O. Box 736 Mt. Vernon, KY 40456 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self Occupation attorney Aggregate Year-to-Date—\$ 450.00 | Date (month, day, year) 07-23-84 | Amount of Each Receipt This Period 250.00 |
| G. Full Name, Mailing Address and ZIP Code Dr. Charles C. Smith 2109 Starmont Road Louisville, KY 40207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Self Employed Occupation Doctor Aggregate Year-to-Date—\$ 500.00 | Date (month, day, year) 09-28-84 | Amount of Each Receipt This Period 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3500.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|---|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Gary H. Baise 8352 Old Dominion Drive McLean, VA 22102 | Name of Employer self | Date (month, day, year) 09-17-84 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Dale H. Fisher 3016 Springcrest Drive Louisville, KY 40222 | Name of Employer The Cumberland | Date (month, day, year) 09-11-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Bank President | Aggregate Year-to-Date—\$ 300.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Paul M. Stafford 499 Church Street Paintsville, KY 41240 | Name of Employer none | Date (month, day, year) 09-17-84 | Amount of Each Receipt This Period 58.97 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date—\$ 333.97 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Pamela Blackstone 4119 Fox Run Lane Owensboro, KY 42301 | Name of Employer Blackstone & Schmitt | Date (month, day, year) 09-13-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Nursing | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Corinne R. Gay Brookview Farms Pine Grove, KY 40470 | Name of Employer Self | Date (month, day, year) 07-23-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Farmer | Aggregate Year-to-Date—\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Robert T. Manfuso 8401 Connecticut Avenue Chevy Chase, MD 20815 | Name of Employer Manfuso Brothers | Date (month, day, year) 07-20-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date—\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Robert B. Sutherlin 3636 St. Charles Avenue New Orleans, LA 70115 | Name of Employer Audubon Federal Savings & Loan | Date (month, day, year) 07-19-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation banker | Aggregate Year-to-Date—\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3158.97 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED RECEIPTS

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|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Dr. Herbert R. Booth U.S. Hwy 42 Box 213 Union, KY 41091 | self | 09-24-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date—\$ | 500.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Sloane Graff, Jr. 3900 Barbour Ln. Box 22311 Louisville, KY 40222 | none | 08-20-84 | 15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ | 245.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Russell McConnell Dorset, OH 44032 | McConnell Oil Works, Inc. | 08-09-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation self-employed | Aggregate Year-to-Date—\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert M. Timmerman 2009 Camargo Road Louisville, KY 40207 | self employed | 07-30-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Management Consultant | Aggregate Year-to-Date—\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. David C. Brodie P.O. Box 642 Owensboro, KY 42301 | none | 09-19-84 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ | 800.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles Hagan 755 Chinoe Rd. Lexington, KY 40502 | none | 09-25-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date—\$ | 270.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Joseph A. Moller P. O. Box 626 Scottsdale, AZ 85252 | Information Requested | 07-26-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ | 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2165.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|---|--|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Fred Tuck Route 4, Box 95 Morgantown, KY 42261 | Name of Employer none | Date (month, day, year) 09-14-84 | Amount of Each Receipt this Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date--\$ 1215.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. L. Allan Caperton 8202 Wolf Pen Branch Road Prospect, KY 40059 | Name of Employer Self-employed | Date (month, day, year) 09-11-84 | Amount of Each Receipt This Period 150.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Investor | Aggregate Year-to-Date--\$ 300.00 | |
| C. Full Name, Mailing Address and ZIP Code Mrs. R. H. Hargrove 525 Southfield Road Shreveport, LA 71106 | Name of Employer none | Date (month, day, year) 08-09-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation housewife | Aggregate Year-to-Date--\$ 300.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. C. Gordon Wade 2730 Main Chase Ln. Covington, KY 41017 | Name of Employer self | Date (month, day, year) 09-10-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation business consultant | Aggregate Year-to-Date--\$ 1500.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Malcolm G. Chace, Jr. P. O. Box 14246 West Palm Beach, FL 33405 | Name of Employer none | Date (month, day, year) 08-09-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date--\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Mitchell D. Haynes 2490 Tulsa Road Lexington, KY 40503 | Name of Employer Alvin Hayes Trucking Co. | Date (month, day, year) 07-18-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation businessman | Aggregate Year-to-Date--\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. S. Tilford Payne, Jr. 2514 Poplar Crest Road Louisville, KY 40207 | Name of Employer none | Date (month, day, year) 08-21-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date--\$ 550.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2900.00 |
| TOTAL This Period (last page this line number only) | | | |

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| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Army Conley Staffordsville, KY 41256 | | Name of Employer Information Requested | Date (month, day, year) 09-19-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt this Period 500.00 |
| | | Aggregate Year-to-Date-\$ 600.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Charles Hoke 1114 County Cork Drive Murray, KY 42071 | | Name of Employer Hoke Mining Co. | Date (month, day, year) 09-30-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President/Owner | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Robert Powers 304 Redding Rd. Lexington, KY 40502 | | Name of Employer Central Bank and Trust Co. | Date (month, day, year) 07-10-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Banker | Amount of Each Receipt This Period 500.00 |
| | | Aggregate Year-to-Date-\$ 530.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Lillie Wrather 1318 Olive Boulevard Murray, KY 42071 | | Name of Employer none | Date (month, day, year) 09-30-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation retired | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Bernard A. Dahlem 604 Briar Hill Road Louisville, KY 40206 | | Name of Employer self | Date (month, day, year) 09-21-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation homemaker | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Warner Jones, Jr. Hermitage Farm U.S. Highway 42 Goshen, KY 40026 | | Name of Employer Self employed | Date (month, day, year) 09-27-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Horse Breeder | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Mary R. Roberts Route 7 Box 95 Marion, KY 42064 | | Name of Employer self | Date (month, day, year) 09-10-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation homemaker | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ 275.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4500.00 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. John T. Acree, III
 6021 W. Highway 146

Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lincoln Income Life Ins. Co.
 08-09-84

Occupation

President

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

Amount of Each
Receipt this Period

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Robert Dooley
 308 Angela Ct.

Lexington, KY 40503

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lexington Fire Protection
 09-18-84

Occupation

Fireman

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

Amount of Each
Receipt This Period

200.00

C. Full Name, Mailing Address and ZIP Code

Mr. Jimmy A. Kincer
 15025 Bircham Road

Louisville, KY 40243

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Copy Corporation

Date (month,
day, year)

09-30-84
 In-Kind
 Office Equipment

Occupation

owner

Aggregate Year-to-Date-\$ 1500.00

Amount of Each
Receipt This Period

625.00

D. Full Name, Mailing Address and ZIP Code

Mr. R. S. Schreiber
 471 West South Street, #502

Kalamazoo, MI 49007

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

08-09-84
 250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

Amount of Each
Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Leonard W. Arentsen
 1800 Evergreen Road

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

BATUS

Date (month,
day, year)

07-30-84
 250.00

Occupation

V Pres/Controller

Aggregate Year-to-Date-\$ 250.00

Amount of Each
Receipt This Period

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Larry C. Ethridge
 2402 Longest Avenue

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84
 500.00

Occupation

attorney

Aggregate Year-to-Date-\$ 500.00

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Joseph E. Lambert
 P.O. Box 736

Mt. Vernon, KY 40456

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-21-84
 200.00

Occupation

attorney

Aggregate Year-to-Date-\$ 450.00

Amount of Each
Receipt This Period

200.00

SUBTOTAL of Receipts This Page (optional) 2325.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--------------------------------------|--|------------------------------------|
| Mr. Neville Smith 148 Locust Manchester, KY 40962 | self employed | 09-04-84 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 700.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Trilby Ball 2124 Griffith Ave Owensboro, KY 42301 | self | 07-26-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ 350.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William E. Fluke 7515 Briarwood Dr. Crestwood, KY 40014 | Industrial Belting | 09-30-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Vice President | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. E. Trine Starnes, Jr. 9801 Westheimer, Suite 1100 Houston, TX 77042 | self | 09-28-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. John Paul Blevins County Attorney Metcalf Co. Courthouse Edmonton, KY 42129 | Metcalf County | 07-30-84 | 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation County Attorney | Aggregate Year-to-Date-\$ 1024.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Ruth L. Geary 3614 N. 27th Street Arlington, VA 22207 | none | 08-09-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Gerald Mansbach P. O. Box 1179 Ashland, KY 41101 | Mansbach Metal | 09-04-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Principal Owner | Aggregate Year-to-Date-\$ 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1425.00 |
| TOTAL This Period (last page this line number only) | | | |

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| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Enos Swain 156 St. Mildred's Court Danville, KY 40422 | | Name of Employer none | Date (month, day, year) 09-26-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation retired | Amount of Each Receipt this Period 200.00 |
| | | Aggregate Year-to-Date-\$ | 300.00 |
| B. Full Name, Mailing Address and ZIP Code Mrs. Mary S. Graham 10504 Florian Rd. Louisville, KY 40223 | | Name of Employer none | Date (month, day, year) 08-27-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Retired | Amount of Each Receipt This Period 50.00 |
| | | Aggregate Year-to-Date-\$ | 305.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. William A. Torsiglieri 2 Linden Lane Chatham, NJ 07928 | | Name of Employer Lloyd Bush & Associates | Date (month, day, year) 08-21-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Analyst | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. John R.S. Brooking 133 Park Road 421 Garrard Street Covington, KY 41011 | | Name of Employer Self | Date (month, day, year) 08-16-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Attorney | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Charles Hagan 755 Chinoe Rd. Lexington, KY 40502 | | Name of Employer none | Date (month, day, year) 09-30-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Retired | Amount of Each Receipt This Period 100.00 |
| | | Aggregate Year-to-Date-\$ | 270.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. John Boyer Moore 301 East Vine Street Lexington, KY 40507 | | Name of Employer Johnson Romonowitz, Inc. | Date (month, day, year) 09-21-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Architect | Amount of Each Receipt This Period 30.00 |
| | | Aggregate Year-to-Date-\$ | 230.00 |
| G. Full Name, Mailing Address and ZIP Code Mr. Fred Tuck Route 4, Box 95 Morgantown, KY 42261 | | Name of Employer none | Date (month, day, year) 09-30-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation retired | Amount of Each Receipt This Period 785.00 |
| | | Aggregate Year-to-Date-\$ | 1215.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2415.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|--|--|------------------------------------|
| Name of Committee (in Full) | | | |
| <u>McConnell Senate Committee</u> | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| <u>Mr. L. Allan Caperton</u> <u>8202 Wolf Pen Branch Road</u> <u>Prospect, KY 40059</u> | <u>Self-employed</u> | <u>09-11-84</u> | <u>150.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Investor</u> | Aggregate Year-to-Date—\$ <u>300.00</u> | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| <u>Mr. James W. Harkess</u> <u>3011 Lightheart Road</u> <u>Louisville, KY 40222</u> | <u>self</u> | <u>07-31-84</u> | <u>100.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Orthopaedic Surgeon</u> | Aggregate Year-to-Date—\$ <u>275.00</u> | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| <u>Mr. Mike J. Odle</u> <u>207 Donna Drive</u> <u>Henderson, KY 42420</u> | <u>Information Requested</u> | <u>09-28-84</u> | <u>1000.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Information Requested</u> | Aggregate Year-to-Date—\$ <u>1000.00</u> | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| <u>Mrs. Jill Wade</u> <u>2730 Main Chase Lane</u> <u>Covington, KY 41017</u> | <u>self</u> | <u>09-10-84</u> | <u>1000.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>homemaker</u> | Aggregate Year-to-Date—\$ <u>1000.00</u> | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| <u>Mrs. Carol Chambers</u> <u>P. O. Box 3908</u> <u>Evansville, IN 47737</u> | <u>self employed</u> | <u>07-26-84</u> | <u>250.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Homemaker</u> | Aggregate Year-to-Date—\$ <u>250.00</u> | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| <u>Mr. Ted Heideman</u> <u>103 Chipping Way, #1</u> <u>Louisville, KY 40222</u> | <u>Louisville Manufacturing</u> | <u>09-20-84</u> | <u>1000.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Exec. Vice President</u> | Aggregate Year-to-Date—\$ <u>1000.00</u> | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| <u>Mr. Stephen M. Peck</u> <u>P.P.N. Partners</u> <u>1 New York Plaza</u> <u>New York, NY 10004</u> | <u>P. P. N. Partners</u> | <u>07-26-84</u> | <u>500.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>businessman</u> | Aggregate Year-to-Date—\$ <u>500.00</u> | |
| SUBTOTAL of Receipts This Page (optional) | | | <u>4000.00</u> |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-------------------------|------------------------------------|
| Mr. Dudley A. White 247 Roblar Avenue Santa Ynez, CA 93460 | Multi Media Management, Inc. | 08-07-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Corporate Executive Aggregate Year-to-Date-\$ 250.00 | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Larry N. Cook 2011 Woodford Place Louisville, KY 40205 | Self Employed | 09-05-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor Aggregate Year-to-Date-\$ 500.00 | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Thomas L. Holton 108 Perkins Road Greenwich, CT 06830 | Information Requested | 07-26-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested Aggregate Year-to-Date-\$ 500.00 | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Bonnie Quantrell Quantrell Cadillac, Inc. 1490 New Circle Road, NE Lexington, KY 40509 | Quantrell Cadillac | 09-04-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Auto Dealer Aggregate Year-to-Date-\$ 500.00 | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. George L. Wright Route 7, Box 653 Russell Springs, KY 42642 | none | 07-16-84 | 10.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired Aggregate Year-to-Date-\$ 310.00 | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Ray C. Dauenhauer, Jr. 1519 Sylvan Way Louisville, KY 40205 | Dauenhauer Plumbing & Heating Co | 09-24-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Contractor Aggregate Year-to-Date-\$ 700.00 | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert H. Kamman 2313 Clarkwood Road Louisville, KY 40207 | Gibbs Inman Co. | 09-14-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Printer Aggregate Year-to-Date-\$ 750.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2210.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. C. A. Robinson 1410 North Cullen P. O. Box 5269 Evansville, IN 47715 | Name of Employer Robinson Engineering | Date (month, day, year) 07-26-84 | Amount of Each Receipt this Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date—\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Norma B. Adams P.O. Box 35 Somerset, KY 42501 | Name of Employer Adams & Adams | Date (month, day, year) 07-23-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ 225.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Dennis T. Dorton 102 Twin Oak Dr. Paintsville, KY 41240 | Name of Employer Citizens National Bank | Date (month, day, year) 07-31-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Banker | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Forest Kinser P. O. Box 364 Leitchfield, KY 42754 | Name of Employer self | Date (month, day, year) 07-03-84 | Amount of Each Receipt This Period 15.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation farmer | Aggregate Year-to-Date—\$ 215.00 | |
| E. Full Name, Mailing Address and ZIP Code Ms. Norma Jean Scott 4000 Buffalo Trace Madisonville, KY 42431 | Name of Employer Fugate Lumber Co. | Date (month, day, year) 07-16-84 | Amount of Each Receipt This Period 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Manager | Aggregate Year-to-Date—\$ 225.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Lee M. Arthurs 319 Avenue C, #9F New York, NY 10009 | Name of Employer Lloyd Bush & Associates | Date (month, day, year) 08-21-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Analyst | Aggregate Year-to-Date—\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Carrie E. Evans 3600 Montclair Avenue Louisville, KY 40218 | Name of Employer self | Date (month, day, year) 08-31-84 | Amount of Each Receipt This Period 10.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 210.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2400.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. M. J. Lamond
 211 Avon Road

Cherry Hill, NJ 08034

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Packard Press

Date (month,
 day, year)

07-26-84

Amount of Each
 Receipt this Period

1000.00

Occupation

financial officer

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Vertner D. Smith, Jr.
 122 Arrowhead Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self/Vertner D. Smith Co.

Date (month,
 day, year)

08-02-84

Amount of Each
 Receipt This Period

500.00

Occupation

President-Owner

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Patricia W. Ballard
 2801 Rainbow Drive

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Greenbaum, Doll & McDonald

Date (month,
 day, year)

09-07-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 1500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Newell Fox
 8800 Denington Drive

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Burger King Franchise

Date (month,
 day, year)

09-30-84

Amount of Each
 Receipt This Period

500.00

Occupation

Restauranteer

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Betty M. Linn
 3614 N. 27th Street

Arlington, VA 22207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

08-09-84

Amount of Each
 Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. E. Trines Starnes, Jr.
 9801 Westheimer, Suite 1100

Houston, TX 77042

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Century Capital Corp.

Date (month,
 day, year)

09-28-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Chairman

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. John Paul Blevins
 County Attorney
 Metcalfe Co. Courthouse
 Edmonton, KY 42129

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Metcalfe County

Date (month,
 day, year)

08-03-84

Amount of Each
 Receipt This Period

975.00

Occupation

County Attorney

Aggregate Year-to-Date-\$ 1024.00

SUBTOTAL of Receipts This Page (optional)

5225.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|--|------------------------------------|
| Mr. Kenneth W. Gemmill 741 Grenoble Road Jamison, PA 18929 | none | 08-23-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>retired</u> | Aggregate Year-to-Date-\$ <u>500.00</u> | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Gerald Mansbach P. O. Box 1179 Ashland, KY 41101 | Mansbach Metal | 09-13-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Principal Owner</u> | Aggregate Year-to-Date-\$ <u>300.00</u> | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Alice Tatum 515 Fountain Avenue Georgetown, KY 40324 | Information Requested | 09-04-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Information Requested</u> | Aggregate Year-to-Date-\$ <u>500.00</u> | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Brooks H. Bower 8619 Nottingham Parkway Louisville, KY 40222 | Papercone Corporation | 09-11-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Information Requested</u> | Aggregate Year-to-Date-\$ <u>250.00</u> | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Mary S. Graham 10504 Florian Rd. Louisville, KY 40223 | none | 09-10-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Retired</u> | Aggregate Year-to-Date-\$ <u>305.00</u> | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Christina Lee Brown Poplar Terrace 6501 Longview Lane Louisville, KY 40222 | self | 07-20-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>housewife</u> | Aggregate Year-to-Date-\$ <u>1000.00</u> | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Miles Haman Apt. 305 Charleston Apts. Paducah, KY 42001 | none | 07-17-84 | 400.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>none</u> | Aggregate Year-to-Date-\$ <u>750.00</u> | |
| SUBTOTAL of Receipts This Page (optional) | | | 2750.00 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED RECEIPTS

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|---|--|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Lester D. Moore 1639 East Blackford Avenue Evansville, IN 47714 | Moore Engineering | 07-26-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation owner | Aggregate Year-to-Date—\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Fred Tuck Route 4, Box 95 Morgantown, KY 42261 | none | 09-30-84 | 215.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ | 1215.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Betty Dubbs Cardinal 2770 South Ocean Palm Beach, FL 33480 | Information Requested | 09-21-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. John D. Harper Route 2, Box 336 Shepherdsville, KY 40165 | Powered Pipe | 08-03-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Engineer | Aggregate Year-to-Date—\$ | 300.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. William N. Offutt, IV 135 E. Maxwell Street Lexington, KY 40508 | self | 09-25-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation M.D. F.A.C.S. Physician | Aggregate Year-to-Date—\$ | 500.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Herman R. Charbonneau 171 Kilburn Road Garden City, NY 11530 | Chemical Bank | 07-26-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Vice President | Aggregate Year-to-Date—\$ | 500.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Ralph L. Hennebach 33 Tennyson Drive Short Hills, NJ 07078 | Asarco, Inc. | 08-09-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation CEO | Aggregate Year-to-Date—\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2415.00 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Lynda Y. Peppard
7237 Stefani Drive

Dallas, TX 75225

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-26-84

Amount of Each
Receipt this Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Mary A. Whittle
22 Public Square

Leitchfield, KY 42754

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-07-84

Amount of Each
Receipt This Period

12.50

Occupation

homemaker

Aggregate Year-to-Date-\$ 212.50

C. Full Name, Mailing Address and ZIP Code

Mr. Caleb B. Cooley
P. O. Box 2707

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Cooley Hall & Harris PSC

Date (month,
day, year)

09-27-84

Amount of Each
Receipt This Period

400.00

Occupation

CPA

Aggregate Year-to-Date-\$ 400.00

D. Full Name, Mailing Address and ZIP Code

Mr. Robert B. Horner
4001 Glenarm Road

Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-07-84

Amount of Each
Receipt This Period

200.00

Occupation

farmer

Aggregate Year-to-Date-\$ 400.00

E. Full Name, Mailing Address and ZIP Code

Mr. John C. Quiggins
681 Chandler Avenue

Radcliff, KY 40160

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-10-84

Amount of Each
Receipt This Period

1000.00

Occupation

realtor

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Warren Wright, Jr.
3305 Versailles Rd

Lexington, KY 40511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Wright Enterprises

Date (month,
day, year)

09-14-84

Amount of Each
Receipt This Period

1000.00

Occupation

owner

Aggregate Year-to-Date-\$ 2000.00

G. Full Name, Mailing Address and ZIP Code

Mr. David L. Daugherty
1209 Wellington Place, North

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Daugherty & Trautwein, Inc.

Date (month,
day, year)

09-04-84

Amount of Each
Receipt This Period

1000.00

Occupation

Professional Engineer

Aggregate Year-to-Date-\$ 1250.00

SUBTOTAL of Receipts This Page (optional)

4112.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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|---|---|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Robert H. Kamman 2313 Clarkwood Road Louisville, KY 40207 | Name of Employer Gibbs Inman Co. | Date (month, day, year) 09-14-84 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Printer | Aggregate Year-to-Date—\$ 750.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. John W. Robinson 8906 Peterborough Dr. Louisville, KY 40222 | Name of Employer Homebuilders Assn. of Lou., Inc. | Date (month, day, year) 09-27-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation executive | Aggregate Year-to-Date—\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mrs. Norma B. Adams P.O. Box 35 Somerset, KY 42501 | Name of Employer Adams & Adams | Date (month, day, year) 09-10-84 | Amount of Each Receipt This Period 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ 225.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Norman V. Kinsey Suite 1805, Louisiana Tower 401 Edwards Street Shreveport, LA 71101 | Name of Employer Kinsey Interest | Date (month, day, year) 07-26-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation president | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Ms. Norma Jean Scott 4000 Buffalo Trace Madisonville, KY 42431 | Name of Employer Fugate Lumber Co. | Date (month, day, year) 09-18-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Manager | Aggregate Year-to-Date—\$ 225.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Robert Lawrence Ashe, Jr. 230 Peachtree Street, NW Suite 1100 Atlanta, GA 30303 | Name of Employer self | Date (month, day, year) 07-19-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Lawyer | Aggregate Year-to-Date—\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Carrie E. Evans 3600 Montclair Avenue Louisville, KY 40218 | Name of Employer self | Date (month, day, year) 09-17-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 210.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3175.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|---|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mrs. Alice H. Lancaster 4620 Upper River Road Louisville, KY 40222 | self | 09-26-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Alida S. Snow P. O. Box 23 Marvinton, VA 22480 | self | 08-09-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation housewife | Aggregate Year-to-Date—\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Charles D. Barnett 311 Cocoonut Row Palm Beach, FL 33480 | self | 07-09-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ | 1000.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert E. Fox 1405 Meganwood Circle Lexington, KY 40502 | Jura Energy Consultants | 08-16-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Geologists | Aggregate Year-to-Date—\$ | 450.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Benjamin I. Steiner 40 April Lane Huntingdon Valley, PA 19006 | Packard Press | 08-06-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Vice-President of Finance | Aggregate Year-to-Date—\$ | 1000.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. John Paul Blevins County Attorney Metcalfe Co. Courthouse Edmonton, KY 42129 | Metcalfe County | 08-03-84 | 24.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation County Attorney | Aggregate Year-to-Date—\$ | 1024.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. R. L. Gilde P.O. Box 32215 4061 McCollum Ct. Louisville, KY 40232 | Industrial Belting & Trans. Inc | 09-30-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ | 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 4224.00 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Samuel S. Mansbach
 P.O. Box 1179

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self Employed

Date (month,
 day, year)

09-04-84

Amount of Each
 Receipt this Period

100.00

Occupation

Principle Owner

Aggregate Year-to-Date-\$ 300.00

B. Full Name, Mailing Address and ZIP Code

Mr. G. E. Taylor
 P. O. Box 575

Bridgeport, TX 76026

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

08-09-84

Amount of Each
 Receipt This Period

250.00

Occupation

self employed

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Harris Bowers
 4060 Buffalo Trace

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

09-06-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Mary S. Graham
 10504 Florian Rd.

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

09-24-84

Amount of Each
 Receipt This Period

50.00

Occupation

Retired

Aggregate Year-to-Date-\$ 305.00

E. Full Name, Mailing Address and ZIP Code

Mr. Robert A. Mickler
 444 Bristol Road

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Bob Mickler's Inc.

Date (month,
 day, year)

09-17-84

Amount of Each
 Receipt This Period

100.00

Occupation

retailer

Aggregate Year-to-Date-\$ 300.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Miles Haman
 Apt. 305
 Charleston Apts.
 Paducah, KY 42001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

08-14-84

Amount of Each
 Receipt This Period

300.00

Occupation

none

Aggregate Year-to-Date-\$ 750.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Belle Clay Morton
 5815 Round Hill Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

09-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Martine C. Tway
 5100 Brownsboro Road, Apt. 1213
 Louisville, KY 40208

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-24-84

Amount of Each
Receipt this Period

500.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
 Leith Lane, Apt. #715

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

McConnell Senate Committee

Date (month,
day, year)

07-13-84

Amount of Each
Receipt This Period

5.00

Occupation

Political Consultant

Aggregate Year-to-Date-\$ 310.00

C. Full Name, Mailing Address and ZIP Code

Mr. Kenneth R. Harshberger
 12351 Apache Pass ...

Evansville, IN 47712

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-28-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. George H. Warren, Jr.
 1247 Laurel Drive

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Zogg Oil Company

Date (month,
day, year)

07-26-84

Amount of Each
Receipt This Period

250.00

Occupation

Oil & Gas Developer

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Clyde Childers, Sr.
 310 Scott Avenue

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-20-84

Amount of Each
Receipt This Period

1000.00

Occupation

Retired

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Floyd T. Hensley, Jr.
 Route 3 Box 348
 1822 N. 68 Highway
 Campbellsville, KY 42718

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Taylor County Bank

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

500.00

Occupation

Banker

Aggregate Year-to-Date-\$ 700.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Lena Pfeffer
 156 William Street

Hazlet, NJ 07730

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lloyd Bush & Associates

Date (month,
day, year)

08-27-84

Amount of Each
Receipt This Period

1000.00

Occupation

Vice President

Aggregate Year-to-Date-\$ 1000.00

SUBTOTAL of Receipts This Page (optional)

4255.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Mary A. Whittle
 22 Public Square

Leitchfield, KY 42754

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

09-21-84

Amount of Each
 Receipt this Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 212.50

B. Full Name, Mailing Address and ZIP Code

Ms. Janet H. Coors
 718 W. Roller Coaster Road

Tucson, AZ 85704

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

09-21-84

Amount of Each
 Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. David L. Huber
 2335 Village Drive

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jefferson County Gov.

Date (month,
 day, year)

08-09-84

Amount of Each
 Receipt This Period

500.00

Occupation

C E O

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. David A. Raese
 Lebanon Ave.

Morgantown, WV 26505

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dominion Post

Date (month,
 day, year)

07-19-84

Amount of Each
 Receipt This Period

1000.00

Occupation

sports writer/newspaper

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Dr. Lloyd G. Yopp
 517 Briar Hill Road

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

07-31-84

Amount of Each
 Receipt This Period

150.00

Occupation

M.D.

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
 643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
 day, year)

07-09-84

Amount of Each
 Receipt This Period

25.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$ 380.00

G. Full Name, Mailing Address and ZIP Code

Mr. Fred G. Karem
 2068 Von List Way

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Shuffett, Kenton, Curry & Karem

Date (month,
 day, year)

09-12-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 1900.00

SUBTOTAL of Receipts This Page (optional)

3275.00

TOTAL This Period (last page this line number only)

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|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Jose Luis Rodriguez 4597 St. Andrews Road Boynton Beach, FL 33436 | Corky Foods Corp. | 09-28-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman of the Board | Aggregate Year-to-Date-\$ | 500.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Theodore A. Adams, Jr. 6551 Loisdale Court Springfield, VA 22150 | Unifed Industries Incorporated | 07-12-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Corporate Executive | Aggregate Year-to-Date-\$ | 1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Haden Kirkpatrick P. O. Box 11788 Lexington, KY 40578 | The Thoroughbred Press Co., Inc. | 09-28-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ | 349.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Catherine M. Shallcross 4816 Bainbridge Row Drive Louisville, KY 40207 | self | 09-06-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 450.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William W. Lawrence 607 Cressbrook Drive Louisville, KY 40206 | self | 09-14-84 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ | 300.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. R. C. Soaper P.O. Box 215 Henderson, KY 42420 | Soaper Chemical | 07-26-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ | 250.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Jane Norton Barrett 8221 Wolf Pen Branch Road Prospect, KY 40059 | self | 09-27-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 2000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3400.00 |
| TOTAL This Period (last page this line number only) | | | |

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|--|---|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Curtiss E. Frank 7 Butternut Hollow Road Greenwich, CT 06830 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer National Executive Serv. Corp. Occupation president Aggregate Year-to-Date-\$ | Date (month, day, year) 08-13-84 250.00 | Amount of Each Receipt this Period 250.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. D. Irving Long 2112 River Bluff Road Louisville, KY 40207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer 4th Ave. Corporation Occupation President-real Estate Aggregate Year-to-Date-\$ | Date (month, day, year) 09-10-84 300.00 | Amount of Each Receipt This Period 100.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. A. Clay Stewart 1313 Richmond Road Lexington, KY 40502 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer none Occupation retired Aggregate Year-to-Date-\$ | Date (month, day, year) 07-13-84 2000.00 | Amount of Each Receipt This Period 1000.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. Joseph A. Blitzko 12004 Log Cabin Lane Anchorage, KY 40223 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Touche Ross Occupation Accountant Aggregate Year-to-Date-\$ | Date (month, day, year) 08-28-84 300.00 | Amount of Each Receipt This Period 100.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Louis R. Glogower, Jr. 5100 Brownsboro Rd., #732 Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date-\$ | Date (month, day, year) 09-26-84 500.00 | Amount of Each Receipt This Period 500.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. George J. Marlin Marine Midland Bank, N.A. 40 Wall Street New York, NY 10005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Marine Midland Bank Occupation Banker Aggregate Year-to-Date-\$ | Date (month, day, year) 07-26-84 500.00 | Amount of Each Receipt This Period 500.00 |
| G. Full Name, Mailing Address and ZIP Code Ms. Joy W. Taylor 2930 Kent Drive Oklahoma City, OK 73120 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer none Occupation retired Aggregate Year-to-Date-\$ | Date (month, day, year) 07-26-84 500.00 | Amount of Each Receipt This Period 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2950.00 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Janice Bowers
4060 Buffalo Trace

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84

Amount of Each
Receipt this Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date—\$

1200.00

B. Full Name, Mailing Address and ZIP Code

Mr. George F. Green
124 Craig Street

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date—\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William F. Miles
Route 2
Box 133

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Process Machinery, Inc

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

200.00

Occupation

Chairman of Board

Aggregate Year-to-Date—\$

225.00

D. Full Name, Mailing Address and ZIP Code

Mrs. W. Waverly Townes
542 Garden Drive

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84

Amount of Each
Receipt This Period

750.00

Occupation

homemaker

Aggregate Year-to-Date—\$

750.00

E. Full Name, Mailing Address and ZIP Code

Mr. I. H. Buchanan, Jr.
151 Parkway

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

200.00

Occupation

Coal Operator

Aggregate Year-to-Date—\$

700.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Miles Haman
Apt. 305
Charleston Apts.
Paducah, KY 42001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-10-84

Amount of Each
Receipt This Period

50.00

Occupation

none

Aggregate Year-to-Date—\$

750.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Louise Urbina
3000 SW 128th Avenue

Miami, FL 33175

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date—\$

250.00

SUBTOTAL of Receipts This Page (optional)

3450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 24 of 50 for
LINE NUMBER 1(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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|---|--|--|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt this Period |
| Mr. Terry Carmack Leith Lane, Apt. #715 Louisville, KY 40218 | | McConnell Senate Committee 07-23-84 | 45.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Political Consultant Aggregate Year-to-Date-\$ 310.00 | |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mrs. Linda P. Harshberger 12351 Apache Pass Evansville, IN 47712 | | self 09-28-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation homemaker Aggregate Year-to-Date-\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Harvey Olmstead 1776 S. Jackson Suite 902 Denver, CO 80210 | | Harvey Olmstead Co. 08-09-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation partner Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Dr. Richard Weddle 208 College Street Somerset, KY 42501 | | Britthaven Corp. 07-23-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Physician Aggregate Year-to-Date-\$ 300.00 | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mrs. Barbara Bullitt Christian 3601 Axton Lane Frogs Jump Skyline Prospect, KY 40059 | | self 07-13-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Investments Aggregate Year-to-Date-\$ 450.00 | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Thomas L. Hensley 6206 N. Hitt Rd. Louisville, KY 40222 | | Druthers, Inc. 08-14-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President Aggregate Year-to-Date-\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Gerald H. Phipps P. O. Box 4387 Denver, CO 80204 | | Gerald H. Phipps, Inc. 08-27-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation General Contractor Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3395.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Benny G. Williams
812 South Broad Street

Thomasville, GA 31792

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-20-84

Amount of Each
Receipt this Period

1000.00

Occupation

retired

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. James P. Cowles
P. O. Box 2160

Spokane, WA 99203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Inland Empire Paper Company

Date (month,
day, year)

08-09-84

Amount of Each
Receipt This Period

250.00

Occupation

Executive

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Melanie C. Huber
2335 Village Drive

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-09-84

Amount of Each
Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Everett Rains
P.O. Box 8

Williamsburg, KY 40769

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Whitley County

Date (month,
day, year)

08-29-84

Amount of Each
Receipt This Period

50.00

Occupation

County Clerk

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mr. David A. York
4106 Fairfax Court

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-24-84

Amount of Each
Receipt This Period

200.00

Occupation

CPA

Aggregate Year-to-Date-\$ 225.00

F. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
day, year)

08-01-84

Amount of Each
Receipt This Period

25.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$ 380.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Jan S. Karzen
515 Country Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Paul Semonin Co.

Date (month,
day, year)

09-07-84

Amount of Each
Receipt This Period

500.00

Occupation

Real Estate

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional) 2525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Page 26 of 50 for
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 (Use separate schedule(s) for each
 category of the Detailed
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Ernie Rogers
PO Box 162

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-19-84

Amount of Each
Receipt this Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Mervin K. Eblen
308 Main Street

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

200.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. R. Keller Kitchen
2103 Twin Hill Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

KY Machinery

Date (month,
day, year)

09-05-84

Amount of Each
Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date-\$ 750.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Catherine M. Shallcross
1816 Bainbridge Row Drive

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-11-84

Amount of Each
Receipt This Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 450.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Barbara C. Ferguson
1006 Doric Circle

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-20-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Ronald LeMaster
P.O.Box 425

South Shore, KY 41175

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Ron LeMaster Insurance, Inc.

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

500.00

Occupation

Insurance Agent

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. E. E. Spear

Kettle, KY 42752

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-18-84

Amount of Each
Receipt This Period

250.00

Occupation

retired farmer

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 27 of 50 for
LINE NUMBER 1(a)
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Donald C. Barton
1014 Circle Drive

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

09-18-84

Amount of Each
Receipt this Period

500.00

Occupation

Physician

Aggregate Year-to-Date—\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Alice K. Frankel, II
Bluegrass Road

Danville, KY 40422

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-16-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date—\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Fred V. Lucas
207 W. 7th St.

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

100.00

Occupation

retired

Aggregate Year-to-Date—\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Ann Stewart
P.O. Box 130

Brownsville, KY 42210

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-07-84

Amount of Each
Receipt This Period

587.50

Occupation

homemaker

Aggregate Year-to-Date—\$ 587.50

E. Full Name, Mailing Address and ZIP Code

Mr. Joseph A. Blitzko
12004 Log Cabin Lane

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Touche Ross

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

200.00

Occupation

Accountant

Aggregate Year-to-Date—\$ 300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Robert W. Marshall
1054 Alta Vista Road

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-11-84

Amount of Each
Receipt This Period

750.00

Occupation

Information Requested

Aggregate Year-to-Date—\$ 750.00

G. Full Name, Mailing Address and ZIP Code

Mr. Jack I. Branham, Jr.
P. O. Box 433

Betsy Layne, KY 41605

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

100.00

Occupation

Retired

Aggregate Year-to-Date—\$ 300.00

SUBTOTAL of Receipts This Page (optional) 2487.50

TOTAL This Period (last page this line number only)

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 LINE NUMBER 1 (a)
 (Use separate schedule(s) for each
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|---|---------------------------------|-----------------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| <u>McConnell Senate Committee</u> | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Elmo Greer P.O. Box 730 London, KY 40741 | Corbin Deposit Bank | 08-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation banker | Aggregate Year-to-Date-\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Clarence Miller Rt. 8 Shelbyville, KY 40065 | none | 09-06-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Richard M. Trautwein 8220 Wolf Pen Branch Rd. Prospect, KY 40059 | Barnett & Alagia | 09-19-84 | 840.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 840.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Raymond L. Buse, Jr. P.O. Box 709 Covington, KY 41094 | Buse Financial Services | 09-24-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Financial Advisor | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Arthur B. Hancock, III Rt 2 Winchester Rd Stone Farm Paris, KY 40361 | Self | 09-25-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation horse farmer | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Joan Scheele Mueller 844 Morningside Drive Ridgewood, NJ 07450 | none | 08-09-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Isaac VanMeter Rt. 5, Edgemont Rd. Maysville, KY 41056 | | 09-12-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3940.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Terry Carmack
 Leith Lane, Apt. #715

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

McConnell Senate Committee
 08-13-84

Date (month,
 day, year)

Amount of Each
 Receipt this Period

160.00

Occupation

Political Consultant

Aggregate Year-to-Date-\$ 310.00

B. Full Name, Mailing Address and ZIP Code

Mr. George L. Hart
 Rural Route Box 171

Eddyville, KY 42038

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

08-20-84

Amount of Each
 Receipt This Period

100.00

Occupation

Retired

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Thomas L. Ossenberrg
 3314 Bayard Park Drive

Evansville, IN 47715

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Strouse & Bros., Inc.

Date (month,
 day, year)

07-26-84

Amount of Each
 Receipt This Period

250.00

Occupation

Vice President

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Charles L. Weisberg
 1400 Willow Ave., #1901

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
 day, year)

08-21-84

Amount of Each
 Receipt This Period

250.00

Occupation

Antique Dealer

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Dr. Charles D. Clark
 801 S. 16 Street

Murray, KY 42071

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

08-30-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Physician

Aggregate Year-to-Date-\$ 2000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Francisco J. Hernandez
 9600 S. W. 93rd Avenue

Miami, FL 33176

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Agro Tech International

Date (month,
 day, year)

09-28-84

Amount of Each
 Receipt This Period

500.00

Occupation

president

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Mr. R. H. Pickens
 800 Preston State Bank Bldg.

Dallas, TX 75225

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Pickens Co., Inc.

Date (month,
 day, year)

09-10-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Investments

Aggregate Year-to-Date-\$ 1000.00

SUBTOTAL of Receipts This Page (optional)

3260.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1(a)
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|---|--|---|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. David L. Williams 210 Allen Street Burkesville, KY 42717 | Name of Employer Cumberland County | Date (month, day, year) 07-18-84 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Court Clerk | Aggregate Year-to-Date—\$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Joan E. Cox 187 N. Bellaire Ave. Louisville, KY 40206 | Name of Employer Humana | Date (month, day, year) 08-06-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Consultant | Aggregate Year-to-Date—\$ 450.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | Name of Employer Self Employed | Date (month, day, year) 09-30-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Auto Dealer | Aggregate Year-to-Date—\$ 800.00 | In-Kind Campaign Car |
| D. Full Name, Mailing Address and ZIP Code Mr. John H. Rasnick P. O. Box 933 Pikeville, KY 41501 | Name of Employer Summitt Engineering | Date (month, day, year) 09-21-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date—\$ 700.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Milton S. Yunker P.O. Box 1983 Owensboro, KY 42302 | Name of Employer Zogg Oil Company | Date (month, day, year) 07-26-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Oil & Gas Developer | Aggregate Year-to-Date—\$ 1280.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Russell Harris Davis, Sr. 643 North 29th Street Louisville, KY 40212 | Name of Employer Lou. & Jeff. Co. Conv. Bureau | Date (month, day, year) 09-05-84 | Amount of Each Receipt This Period 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Clerk | Aggregate Year-to-Date—\$ 380.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Ron Karzen 515 Country Lane Louisville, KY 40222 | Name of Employer Self employed | Date (month, day, year) 09-06-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Builder | Aggregate Year-to-Date—\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2025.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|--------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert S. Rosenbaum R. S. Rosenbaum Co. 425 Hudson Street New York, NY 10014 | R. S. Rosenbaum Co. | 08-13-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ | 500.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Bernard M. Althoff 34 Mendota Avenue Rye, NY 10580 | Satterler-Stephens | 07-26-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ | 1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Mervin K. Eblen 308 Main Street Hazard, KY 41701 | self | 07-26-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date—\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Hattie B. Klein 6005 Orion Road Louisville, KY 40222 | self | 07-19-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. James A. Shuffett 1200 Second National Plaza Lexington, KY 40507 | self | 09-17-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date—\$ | 250.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Minx Auerbach 1400 Willow, #405 Louisville, KY 40204 | Interior Directions | 09-21-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ | 500.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Pamela H. Ferguson 180 Scranton Court Zionsville, IN 46077 | self | 09-28-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 4450.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Lawrence Lewis
 104 Bentley Avenue
 P. O. Box 180
 Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

08-17-84

Amount of Each
Receipt this Period

100.00

Occupation

Grocer

Aggregate Year-to-Date--\$ 300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Paul E. Spear
 HCR 4, Box 387

Oxkettle, KY 42752

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Cumberland County

Date (month,
day, year)

07-18-84

Amount of Each
Receipt This Period

250.00

Occupation

Circuit Court Clerk

Aggregate Year-to-Date--\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gordon H. Berg
 175 Federal Street

Boston, MA 02110

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Berg & Co.

Date (month,
day, year)

09-28-84

Amount of Each
Receipt This Period

1000.00

Occupation

investment banker

Aggregate Year-to-Date--\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Alice K. Frankel, II
 Bluegrass Road

Danville, KY 40422

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

08-27-84

Amount of Each
Receipt This Period

50.00

Occupation

homemaker

Aggregate Year-to-Date--\$ 300.00

E. Full Name, Mailing Address and ZIP Code

Mr. T. D. Lockett, II
 425 Lightfoot Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-24-84

Amount of Each
Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date--\$ 700.00

F. Full Name, Mailing Address and ZIP Code

Dr. Lowell L. Stokes
 440 Country Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self Employed

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

300.00

Occupation

Doctor

Aggregate Year-to-Date--\$ 300.00

G. Full Name, Mailing Address and ZIP Code

Dr. Eli C. Boggs
 281 E. Main Street

Hazard, KY 41701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-13-84

Amount of Each
Receipt This Period

100.00

Occupation

Physician

Aggregate Year-to-Date--\$ 600.00

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

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|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Steven Goodman 2406 Merrick Road Louisville, KY 40207 | Byck Bros & Co | 07-26-84 | 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retail | Aggregate Year-to-Date-\$ | 225.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Jorge L. Mas 10441 SW 187th Street Perrine, FL 33157 | Chuch & Tower of Florida, Inc. | 09-28-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Joseph Buz Tharp, III 134 Main Street Paintsville, KY 41240 | Brandeis Machinery | 09-18-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ | 400.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Jack I. Branham, Jr. P. O. Box 433 Betsy Layne, KY 41605 | none | 09-10-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ | 300.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Wendell Gunn 3254 Saxon Drive Lexington, KY 40503 | KY Central | 09-21-84 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Insurance Executive | Aggregate Year-to-Date-\$ | 300.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Dennis Miller 7209 Columbia Avenue Louisville, KY 40222 | Industrial Belting | 09-30-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation vice president | Aggregate Year-to-Date-\$ | 250.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert T. Trautwein 7814 Pine Ridge Rd. Louisville, KY 40222 | Self-Daugherty, Trautwein, & Har | 09-04-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Professional Engineer | Aggregate Year-to-Date-\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2375.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|---|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Lloyd A. Bush 156 William Street New York, NY 10038 | Name of Employer Lloyd Bush & Assoc. | Date (month, day, year) 08-13-84 | Amount of Each Receipt this Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation software/Financial Consultant | Aggregate Year-to-Date—\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Seth W. Hancock Claiborne Farm Route 2 Paris, KY 40361 | Name of Employer Self | Date (month, day, year) 08-23-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Thoroughbred Breeder | Aggregate Year-to-Date—\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. F. P. Mullins 1612 Gardiner Lane, Unit 207 Louisville, KY 40205 | Name of Employer Information Requested | Date (month, day, year) 09-14-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Raymond E. Veal 3205 Hobcaw Lane Lexington, KY 40502 | Name of Employer self | Date (month, day, year) 07-03-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation realtor | Aggregate Year-to-Date—\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack Leith Lane, Apt. #715 Louisville, KY 40218 | Name of Employer McConnell Senate Committee | Date (month, day, year) 08-28-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Political Consultant | Aggregate Year-to-Date—\$ 310.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Helen E. Hatcher The Lodge Highland Farms Black Mountain, NC 28711 | Name of Employer none | Date (month, day, year) 08-13-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. James L. Paliapito 1309 Park Shore Road La Grange, KY 40031 | Name of Employer Arabian Horses | Date (month, day, year) 09-18-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation owner | Aggregate Year-to-Date—\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3600.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Y. Peyton Wells, Sr. 94 Warrior Road Louisville, KY 40207 | none | 08-29-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. George E. Clark 1400 Willow-2101 Louisville, KY 40204 | Jeff. Co. Economic Development | 08-21-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ | 250.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Fred Hervey P. O. Box 20000 El Paso, TX 79998 | The Circle K Corp | 08-27-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman of the Board | Aggregate Year-to-Date-\$ | 250.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. W. V. Pierce 822 North Ft. Thomas Avenue Fort Thomas, KY 41075 | none | 08-20-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired physician | Aggregate Year-to-Date-\$ | 210.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. David K. Wilson 3022 Vanderbilt Place P. O. Box 121559 Nashville, TN 37212 | Cherokee Equity Corp. | 08-09-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | 1000.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. James D. Crase 600 Little Creek Road Somerset, KY 42501 | Self | 08-15-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ | 250.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. I. W. Hughes 159 Westwind Rd. Louisville, KY 40207 | Brown & Williamson | 08-15-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3030.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|-----------------------------------|----------------------------------|------------------------------------|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Dr. Ben A. Reid, Jr. 98 Warrior Road Louisville, KY 40207 | Self employed | 08-29-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. John W. Deming 3600 Parliament Drive Alexandria, LA 71301 | self employed | 07-26-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Morton Kasdan 600 Col. Anderson Pkwy. Louisville, KY 40222 | Morton L Kasdan, M.D., F.A.C.S. | 07-06-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ 300.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Betty M. Rosenthal 751 Cottage Grove Lane Lexington, KY 40502 | self | 09-04-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Mervin K. Eblen 308 Main Street Hazard, KY 41701 | self | 09-17-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 500.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Alan S. Kopatz 4061 McCollum Court Louisville, KY 40218 | Industrial Belting | 09-30-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation vice president | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Vicki C. Sistrunk 4018 Deer Lake Cr. Prospect, KY 40059 | Jefferson County Gov. | 08-03-84 | 5.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive Secretary | Aggregate Year-to-Date-\$ 257.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1955.00 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Scott K. Ferguson
180 Scranton Court

Zionsville, IN 46077

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-28-84

Amount of Each
Receipt this Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Harry Lewman
125 Chenoweth Lane, Suite 300

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Harry Lewman Co.

Date (month,
day, year)

08-20-84

Amount of Each
Receipt This Period

30.00

Occupation

Realtor

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. and Mrs. Jack P. Spradlin
6903 Wythe Hill Circle

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lincoln Federal/Self

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

25.00

Occupation

President/Homemaker

Aggregate Year-to-Date-\$ 225.00

D. Full Name, Mailing Address and ZIP Code

Mr. George D. Besler
1485 Park Avenue

New York, NY 10022

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-26-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

E. Full Name, Mailing Address and ZIP Code

Mr. J. N. Frankel
Bluegrass Pike

Danville, KY 40422

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Frankel's Dept. Store

Date (month,
day, year)

08-16-84

Amount of Each
Receipt This Period

250.00

Occupation

Owner

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. James E. Lyon
2001 Kirby Drive, Suite 1300

Houston, TX 77019

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

D. R. R. Investments

Date (month,
day, year)

08-27-84

Amount of Each
Receipt This Period

500.00

Occupation

Investments

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Charles E. Stoll
527 Club Ln.

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

08-06-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date-\$ 280.00

SUBTOTAL of Receipts This Page (optional)

2085.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Dr. Eli C. Boggs 281 E. Main Street Hazard, KY 41701 | Name of Employer self | Date (month, day, year) 09-26-84 | Amount of Each Receipt this Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Physician | Aggregate Year-to-Date—\$ 600.00 | |
| B. Full Name, Mailing Address and ZIP Code Ms. Phyllis Goroway 156 William Street New York, NY 10038 | Name of Employer Lloyd Bush & Assoc. | Date (month, day, year) 09-28-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation office manager | Aggregate Year-to-Date—\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Hulin Mattingly Lexington Road Danville, KY 40422 | Name of Employer Information Requested | Date (month, day, year) 09-18-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Joseph Buz Tharp, III 134 Main Street Paintsville, KY 41240 | Name of Employer Brandeis Machinery | Date (month, day, year) 09-18-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date—\$ 400.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Zana R. Brimm 3225 Rosewedge Way Louisville, KY 40216 | Name of Employer none | Date (month, day, year) 07-18-84 | Amount of Each Receipt This Period 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date—\$ 256.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. H. R. Gustafson S 2034 Parkwood Circle Spokane, WA 99203 | Name of Employer none | Date (month, day, year) 08-09-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Margaret K. Miller 1222 Manitau Avenue Louisville, KY 40215 | Name of Employer self employed | Date (month, day, year) 08-21-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date—\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2425.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Vickie Travis 2225 Edinborough Drive Murray, KY 42071 | Name of Employer self | Date (month, day, year) 09-30-84 | Amount of Each Receipt this Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Ms. Waddell Hancock Claiborne Farm Paris, KY 40361 | Name of Employer Clairborne Farm | Date (month, day, year) 08-23-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Thoroughbred Breeder | Aggregate Year-to-Date—\$ 700.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Raymond E. Veal 3205 Hobcaw Lane Lexington, KY 40502 | Name of Employer self | Date (month, day, year) 09-06-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation realtor | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Joanna L. Carter 364 Secretariat Trail Corbin, KY 40701 | Name of Employer self | Date (month, day, year) 08-29-84 | Amount of Each Receipt This Period 150.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 350.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Henderson Hawkins P. O. Box G Elkhorn City, KY 41522 | Name of Employer Information Requested | Date (month, day, year) 09-20-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 330.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Shirley W. Palmer-Ball P. O. Box 7155 Louisville, KY 40207 | Name of Employer Self/Palmer Products | Date (month, day, year) 09-27-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President/Owner | Aggregate Year-to-Date—\$ 300.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Henry J. Werronen 11 Zorn Place Louisville, KY 40206 | Name of Employer Humana Inc. | Date (month, day, year) 09-28-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Exec. | Aggregate Year-to-Date—\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3150.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Ruby Coleman
Box 2009

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

09-28-84

Amount of Each
Receipt this Period

250.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 250.00

B. Full Name, Mailing Address and ZIP Code

Mr. John G. Heyburn, II
55 Hill Road

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Brown, Todd & Heyburn

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

300.00

Occupation

Lawyer

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Dr. W. V. Pierce
822 North Ft. Thomas Avenue

Port Thomas, KY 41075

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-24-84

Amount of Each
Receipt This Period

30.00

Occupation

retired physician

Aggregate Year-to-Date-\$ 210.00

D. Full Name, Mailing Address and ZIP Code

Ms. Bernice McI. Wintersteen
1100 Grays Lane

Haverford, PA 19041

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-26-84

Amount of Each
Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Ms. Margaret A. Curvin
Transgulf Municipal Securities
80 Broad Street
New York, NY 10004

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Transgulf Municipal Securities

Date (month,
day, year)

07-26-84

Amount of Each
Receipt This Period

500.00

Occupation

Executive Vice President

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Alpha Hutchinson
235 Knapp Avenue

Morehead, KY 40351

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Citizens Bank

Date (month,
day, year)

08-24-84

Amount of Each
Receipt This Period

1000.00

Occupation

President

Aggregate Year-to-Date-\$ 2000.00

G. Full Name, Mailing Address and ZIP Code

Dr. Ralph M. Denham
1610 Dundee Way

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

200.00

Occupation

Doctor

Aggregate Year-to-Date-\$ 325.00

SUBTOTAL of Receipts This Page (optional)

2780.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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|---|--|--|------------------------------------|
| Name of Committee (in Full) | | | |
| <u>McConnell Senate Committee</u> | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Albert S. Kellow 1603 Avenue Plaza Louisville, KY 40203 | none | 08-06-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>retired</u> | Aggregate Year-to-Date—\$ <u>450.00</u> | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William E. Rueff Box 40 Morgantown, KY 42261 | self employed | 07-25-84 | 10.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Attorney</u> | Aggregate Year-to-Date—\$ <u>210.00</u> | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Harkness Edwards, Jr. 1620 Traveller Rd Lexington, KY 40504 | retired | 07-06-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>stockbroker</u> | Aggregate Year-to-Date—\$ <u>1000.00</u> | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Madeline LaCroix 1700 Park Shore Road La Grange, KY 40031 | self | 09-18-84 | 800.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>homemaker</u> | Aggregate Year-to-Date—\$ <u>800.00</u> | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Vicki C. Sistrunk 4018 Deer Lake Cr. Prospect, KY 40059 | Jefferson County Gov. | 08-03-84 | 2.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Executive Secretary</u> | Aggregate Year-to-Date—\$ <u>257.00</u> | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Honorable James E. Bailey Rt. 1 Box 257 Russellville, KY 42276 | Logan County | 08-13-84 | 370.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>County Judge</u> | Aggregate Year-to-Date—\$ <u>570.00</u> | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Harry Lewman 125 Chenoweth Lane, Suite 300 Louisville, KY 40207 | The Harry Lewman Co. | 09-26-84 | 970.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Realtor</u> | Aggregate Year-to-Date—\$ <u>1000.00</u> | |
| SUBTOTAL of Receipts This Page (optional) | | | 3252.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|--|--|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. and Mrs. Jack P. Spradlin 6903 Wythe Hill Circle Prospect, KY 40059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Lincoln Federal/Self Occupation President/Homemaker Aggregate Year-to-Date-\$ 225.00 | Date (month, day, year) 09-18-84 | Amount of Each Receipt this Period 100.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Clay M. Bishop, Jr. 101 Walters Street P. O. Box 468 Manchester, KY 40962 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self Occupation Attorney Aggregate Year-to-Date-\$ 1900.00 | Date (month, day, year) 09-04-84 | Amount of Each Receipt This Period 800.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Stuart J. Frankenthal 5540 Forest Lake Dr. Prospect, KY 40059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Barnett & Alagia Occupation Attorney Aggregate Year-to-Date-\$ 250.00 | Date (month, day, year) 09-18-84 | Amount of Each Receipt This Period 250.00 |
| D. Full Name, Mailing Address and ZIP Code Ms. Clara H. Stradley 417 King's Highway Milford, DE 19963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self Occupation Housewife Aggregate Year-to-Date-\$ 1000.00 | Date (month, day, year) 07-13-84 | Amount of Each Receipt This Period 1000.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. F. Newell Bohnett 44-600 Kaneohe Bay Drive Kaneohe, HI 96744 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self employed Occupation Rancher Aggregate Year-to-Date-\$ 250.00 | Date (month, day, year) 08-09-84 | Amount of Each Receipt This Period 250.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. George A. Grace 25 Holly Woods, Apt. B Ft. Thomas, KY 41075 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Electrotype Deluxe Engraving Co. Occupation Supervisor Aggregate Year-to-Date-\$ 275.00 | Date (month, day, year) 07-17-84 | Amount of Each Receipt This Period 50.00 |
| G. Full Name, Mailing Address and ZIP Code Ms. Carolena Mayer Route 4, James Lane Versailles, KY 40383 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self Occupation horseowner Aggregate Year-to-Date-\$ 500.00 | Date (month, day, year) 09-17-84 | Amount of Each Receipt This Period 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2950.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Hattie W. Thompson
1124 Myra Barnes Ave.

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

09-17-84

Amount of Each
Receipt this Period

100.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 600.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Zana R. Brimm
3225 Rosewedge Way

Louisville, KY 40216

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-17-84

Amount of Each
Receipt This Period

73.00

Occupation

Retired

Aggregate Year-to-Date-\$ 256.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Margaret K. Miller
1222 Manitau Avenue

Louisville, KY 40215

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Fred Tuck
Route 4, Box 95

Morgantown, KY 42261

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

07-25-84

Amount of Each
Receipt This Period

5.00

Occupation

retired

Aggregate Year-to-Date-\$ 1215.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Waddell W. Hancock
Claiborne Farm

Paris, KY 40361

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

08-23-84

Amount of Each
Receipt This Period

500.00

Occupation

thoroughbred breeder

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Raymond E. Veal
3205 Hobcaw Ln

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-06-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Joanna L. Carter
364 Secretariat Trail

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-18-84

Amount of Each
Receipt This Period

200.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 350.00

SUBTOTAL of Receipts This Page (optional)

2378.00

TOTAL This Period (last page this line number only)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Charles R. Hayes
1850 Bonniecastle Dr.

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-26-84

Amount of Each
Receipt this Period

250.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 350.00

B. Full Name, Mailing Address and ZIP Code

Mr. James R. Parks
Rt. 1

Webster, KY 40176

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. William E Whaley, Jr.
503 Rolling Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-24-84

Amount of Each
Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mr. George Hunt Collins
24 Overbrook Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

09-26-84

Amount of Each
Receipt This Period

400.00

Occupation

President/Owner

Aggregate Year-to-Date-\$ 600.00

E. Full Name, Mailing Address and ZIP Code

Mr. Kenneth L. Hirsch
2107 Camargo Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Paramount Foods

Date (month,
day, year)

07-10-84

Amount of Each
Receipt This Period

250.00

Occupation

V.P.-Administrator

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Joseph B. Woodlief
331 Zorn Ave., #5

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Glenmore Distilleries Co.

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

100.00

Occupation

Executive

Aggregate Year-to-Date-\$ 400.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Patricia Dabney
399 1/2 Mockingbird Valley Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

07-05-84

Amount of Each
Receipt This Period

800.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1100.00

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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|---|--|--|------------------------------------|
| Name of Committee (in Full) | | | |
| <u>McConnell Senate Committee</u> | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. David A. Jones P.O. Box 1438 Louisville, KY 40201 | Humana | 09-27-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Executive</u> | Aggregate Year-to-Date-\$ <u>2000.00</u> | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Leonidas D. Deters, Jr. 7001 US Highway 42 Louisville, KY 40222 | self | 09-25-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>homemaker</u> | Aggregate Year-to-Date-\$ <u>1000.00</u> | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Philip J. Kendall President, Packard Press 10th & Spring Garden Streets Philadelphia, PA 19123 | Packard Press | 07-26-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>President</u> | Aggregate Year-to-Date-\$ <u>1000.00</u> | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William E. Rueff Box 40 Morgantown, KY 42261 | self employed | 07-25-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Attorney</u> | Aggregate Year-to-Date-\$ <u>210.00</u> | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Bruce Anderson 1008 South Broadway Lexington, KY 40504 | Anderson Oil & Gas Properties | 08-23-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>Oil & Gas Developer</u> | Aggregate Year-to-Date-\$ <u>500.00</u> | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Harkness Edwards, III 130 Jones Nursery Road Lexington, KY 40511 | self | 09-24-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>real estate developer</u> | Aggregate Year-to-Date-\$ <u>1000.00</u> | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Jerry Lamb Indiana Tube Corporation 2100 Lexington Avenue Evansville, IN 47712 | Indiana Tube Corp. | 07-26-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation <u>businessman</u> | Aggregate Year-to-Date-\$ <u>250.00</u> | |
| SUBTOTAL of Receipts This Page (optional) | | | 4850.00 |
| TOTAL This Period (last page this line number only) | | | |

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Summary Page)

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|---|--|-------------------------|------------------------------------|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Arthur K. Smith 1010 Alta Circle Road Louisville, KY 40205 | Smith Furniture | 09-18-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President Aggregate Year-to-Date-\$ 500.00 | | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Honorable James E. Bailey Rt. 1 Box 257 Russellville, KY 42276 | Logan County | 09-21-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation County Judge Aggregate Year-to-Date-\$ 570.00 | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Paul M. Stafford 499 Church Street Paintsville, KY 41240 | none | 08-23-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired Aggregate Year-to-Date-\$ 333.97 | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Jack C. Blackstone, Jr. 4119 Fox Run Lane Owensboro, KY 42301 | self | 09-13-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation physician Aggregate Year-to-Date-\$ 250.00 | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert C. Gatewood 268 St. Matthews Avenue Louisville, KY 40207 | Druther's International Inc. | 08-08-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Businessman Aggregate Year-to-Date-\$ 500.00 | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. John A. Manfuso, Jr. 8401 Connecticut Avenue Chevy Chase, MD 20815 | Manfuso Brothers | 07-20-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation executive Aggregate Year-to-Date-\$ 1000.00 | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Craig D. Sutherland 4000 Main Street Kansas City, MO 64111 | self employed | 07-24-84 | 750.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Lumber Business Aggregate Year-to-Date-\$ 750.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2850.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Hilary J. Boone
 Wimbledon Farm
 1725 Walnut Hill Road
 Lexington, KY 40503

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Wimbledon Farm

Date (month,
day, year)

08-30-84

Amount of Each
Receipt this Period

1000.00

Occupation

Horse Breeder

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. George A. Grace
 25 Holly Woods, Apt. B

Ft. Thomas, KY 41075

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Electrotype Deluxe Engraving Co.

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

25.00

Occupation

Supervisor

Aggregate Year-to-Date-\$ 275.00

C. Full Name, Mailing Address and ZIP Code

Dr. E. Truman Mays
 801 Leaf Lane

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

07-23-84

Amount of Each
Receipt This Period

100.00

Occupation

Surgeon

Aggregate Year-to-Date-\$ 600.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Hattie W. Thompson
 1124 Myra Barnes Ave.

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

400.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 600.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Zana R. Brimm
 3225 Rosewedge Way

Louisville, KY 40216

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-17-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date-\$ 256.00

F. Full Name, Mailing Address and ZIP Code

Mr. Charles Hagan
 755 Chinoe Rd.

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

40.00

Occupation

Retired

Aggregate Year-to-Date-\$ 270.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Robert L. Mitchell
 217 Hamlin St.

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-30-84

Amount of Each
Receipt This Period

400.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 400.00

SUBTOTAL of Receipts This Page (optional)

1995.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 48 of 50 for
LINE NUMBER 1(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Fred Tuck
Route 4, Box 95

Morgantown, KY 42261

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$ 1215.00

Date (month,
day, year)

07-25-84

Amount of Each
Receipt this Period

10.00

B. Full Name, Mailing Address and ZIP Code

Dr. E. Dean Canan
Old Louisville Road

Spisherville, KY 40023

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self Employed

Occupation

General Surgeon

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

09-06-84

Amount of Each
Receipt This Period

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. James E. Hardy
340 E. Main Street

Louisville, KY 40202

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Brinley-Hardy Co.

Occupation

President

Aggregate Year-to-Date-\$ 300.00

Date (month,
day, year)

08-29-84

Amount of Each
Receipt This Period

300.00

D. Full Name, Mailing Address and ZIP Code

Mr. Frederick G. Neikirk
304 College Street

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self employed

Occupation

Attorney

Aggregate Year-to-Date-\$ 350.00

Date (month,
day, year)

08-20-84

Amount of Each
Receipt This Period

100.00

E. Full Name, Mailing Address and ZIP Code

Dr. Tim Lee Carter
701 N. Main Street

Tompkinsville, KY 42167

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$ 515.00

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Alvin S. Haynes, Jr.
2490 Tulsa Road

Lexington, KY 40503

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Alvin Hayes Trucking Co.

Occupation

businessman

Aggregate Year-to-Date-\$ 500.00

Date (month,
day, year)

07-18-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Ronald R. Parry
600 Greenup St.

P. O. Box 472

Covington, KY 41011

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Robinson, Arnzen, Parry & Wentz

Occupation

Attorney

Aggregate Year-to-Date-\$ 1000.00

Date (month,
day, year)

08-17-84

Amount of Each
Receipt This Period

500.00

SUBTOTAL of Receipts This Page (optional)

2160.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 49 of 50 for
 LINE NUMBER 1(a)
 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Beverly C. Wheatley
 343 Kenwood Hill Rd.

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

09-21-84

Amount of Each
Receipt this Period

100.00

Occupation

Campaign Worker

Aggregate Year-to-Date-\$ 300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Leslie Combs, II

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-19-84

Amount of Each
Receipt This Period

1000.00

Occupation

horsebreeder

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Maynard Hogg
 Box 536

Neon, KY 41840

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

08-30-84

Amount of Each
Receipt This Period

500.00

Occupation

Oil Producer

Aggregate Year-to-Date-\$ 500.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Donald G. Powell
 P. O. Box 82

Providence, KY 42450

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Powell Enterprises

Date (month,
day, year)

08-13-84

Amount of Each
Receipt This Period

500.00

Occupation

Executive

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Robert L. Woolery, II
 3643 Old Orchard Drive

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

09-04-84

Amount of Each
Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$ 600.00

F. Full Name, Mailing Address and ZIP Code

Mr. Bernard A. Dahlem
 604 Briar Hill Rd.

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dahlem Construction Co

Date (month,
day, year)

09-21-84

Amount of Each
Receipt This Period

500.00

Occupation

Construction

Aggregate Year-to-Date-\$ 750.00

G. Full Name, Mailing Address and ZIP Code

Mr. Lawrence L. Jones, III
 2116 River Bluff Rd

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Wyatt, Tarrant & Combs

Date (month,
day, year)

09-25-84

Amount of Each
Receipt This Period

974.70

Occupation

Attorney

Aggregate Year-to-Date-\$ 974.70

SUBTOTAL of Receipts This Page (optional)

4074.70

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 50 of 50 for
 LINE NUMBER 1 (a)
 (Use separate schedule(s) for each
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 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Duane R. Roberts
 P. O. Box 2447

Riverside, CA 92516

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

D. R. R. Investments

Date (month,
day, year)

08-27-84

Amount of Each
Receipt this Period

500.00

Occupation

Investments

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. William L. Dommerich
 359 Deer Hollow

Napa, CA 94558

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

08-09-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. John H. Kerr, Jr.
 124 South Ashland

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Kerr Brothers Funeral Home

09-21-84

Amount of Each
Receipt This Period

7.50

Occupation

Funeral Director

Aggregate Year-to-Date-\$ 557.50

D. Full Name, Mailing Address and ZIP Code

Mr. William E. Rueff
 Box 40

Morgantown, KY 42261

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

07-25-84

Amount of Each
Receipt This Period

100.00

Occupation

Attorney

Aggregate Year-to-Date-\$ 210.00

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

857.50

TOTAL This Period (last page this line number only)

149530.17

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 2 for
 LINE NUMBER 1(b)
 (Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

McCreary Co. Rep. Executive Com.
 Box 217

Whitley City, KY 42653

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt this Period

09-04-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

B. Full Name, Mailing Address and ZIP Code

Meade County Republican Comm.
 1361 Old St. Road

Brandenburg, KY 40108

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

09-12-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

C. Full Name, Mailing Address and ZIP Code

Oldham CO. Rep. Women's Club
 c/o Mrs. Donald Rice
 1500 Halls Hill Road
 Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

09-30-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

D. Full Name, Mailing Address and ZIP Code

Fayette Co. Rep. Women's Club
 110 South Hanover Avenue

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

07-10-84

400.00

Occupation

Aggregate Year-to-Date-\$

400.00

E. Full Name, Mailing Address and ZIP Code

Allen Co. Rep. Women's Club
 Route 6, Box 65

Scottsville, KY 42164

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

09-13-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

F. Full Name, Mailing Address and ZIP Code

Good Ole Boys
 of the Grand Old Party

Danville, KY 40422

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

08-06-84

999.00

Occupation

Aggregate Year-to-Date-\$

999.00

G. Full Name, Mailing Address and ZIP Code

Nat. Republican Senatorial Com.
 404 C. Street, N.E.

Washington, DC 20002

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

09-30-84

144.32

Occupation

In-Kind

Reception #2

Aggregate Year-to-Date-\$

2249.96

SUBTOTAL of Receipts This Page (optional)

1943.32

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 2 for
 LINE NUMBER 1(b)
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Rep. County Judges Assoc. of KY
 160 Juniper Drive

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

09-26-84

626.77

Occupation

Aggregate Year-to-Date-\$

626.77

B. Full Name, Mailing Address and ZIP Code

Madison Co. Womens Rep. Club
 Route 6, Box 301

Richmond, KY 40475

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-27-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

C. Full Name, Mailing Address and ZIP Code

Portland Republican Club
 2915 Portland Avenue

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-13-84

500.00

Occupation

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Republican Party of McCreary Co.

Whitley City, KY 42653

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-04-84

50.00

Occupation

Aggregate Year-to-Date-\$

50.00

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

1276.77

TOTAL This Period (last page this line number only)

3220.09

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Non Partisan Political Sup.Com.
Mr. James Hindenach, Treasurer
General Electric Company
Fairfield, CT 06431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

07-24-84

1500.00

Occupation

Aggregate Year-to-Date-\$ 1550.00

B. Full Name, Mailing Address and ZIP Code

Whirlpool PAC
2000 U. S. 33 North

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-27-84

300.00

Occupation

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Borg-Warner PAC
200 S. Michigan

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-16-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Tower Senate Club (PAC)
P. O. Box 794

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-29-84

1000.00

Occupation

Aggregate Year-to-Date-\$ -2000.00

E. Full Name, Mailing Address and ZIP Code

Wagner Castings Company PAC
P. O. Box 1319

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-27-84

100.00

Occupation

Aggregate Year-to-Date-\$ 100.00

F. Full Name, Mailing Address and ZIP Code

ESI-PAC
Mr. T. R. Armstrong, Chairman
P. O. Box 1359
Richardson, TX 75080

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-30-84

750.00

Occupation

Aggregate Year-to-Date-\$ 1050.00

G. Full Name, Mailing Address and ZIP Code

Lone Star Steel PAC
Mr. John M. Morris, Chairman
P. O. Box 35888
Dallas, TX 75235

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-25-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1500.00

SUBTOTAL of Receipts This Page (optional) 5650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 4 for
 LINE NUMBER 1(a)
 (Use separate schedule(s) for each
 category of the Detailed
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Tower Senate Club (PAC)
 P. O. Box 794

Austin, TX 78767

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

09-28-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

Brunswick Good Government Fund
 One Brunswick Plaza

Skokie, IL 60077

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-16-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Eaton Public Policy Association
 100 Erieview Plaza

Cleveland, OH 44114

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-24-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Assoc of Amer. Phys & Surg. PAC
 Mr. Charles Ord
 5201-B Lyngate Court
 Burke, VA 22015

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-30-84

2360.00

Occupation

Aggregate Year-to-Date-\$ 7360.00

In-Kind
 Mailing List - Names

E. Full Name, Mailing Address and ZIP Code

Motorola Emp. Good Govt. Fund
 1776 K Street, N. W.

Washington, DC 20006

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-04-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

F. Full Name, Mailing Address and ZIP Code

Assoc. Builders & Contractors PAC
 1806 South Third Street

Louisville, KY 40208

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-07-84

500.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Tenneco Employees Good Govt. Fund
 P. O. Box 2511
 Houston, TX 77001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-17-84

500.00

Occupation

Aggregate Year-to-Date-\$ 1500.00

SUBTOTAL of Receipts This Page (optional)

7860.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 4 for
 LINE NUMBER 1(c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

American Metal Stamping Assc.PAC
 27027 Chardon Road

Richmond Heights, OH 44143

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

08-30-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

BI PAR PAC
 P. O. Box 278

Henderson, KY 42420

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-10-84

500.00

Occupation

Aggregate Year-to-Date-\$ 1892.70

C. Full Name, Mailing Address and ZIP Code

CLARKPAC
 C/O Clark Equipment Company
 Circle Drive
 Buchanan, MI 40324

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

08-06-84

2500.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

D. Full Name, Mailing Address and ZIP Code

American Standard, Inc.
 Good Government Fund
 40 West 40th Street
 Louisville, KY 40202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-06-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Biggie International Employees
 Better Government Committee
 1000 Virginia Center Parkway
 Richmond, VA 23295

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-06-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

HUMPAC
 P. O. Box 1438

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-20-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Campaign America
 919 Prince Street

Alexandria, VA 22314

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-30-84

2500.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

SUBTOTAL of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 4 for
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 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

National Economic and PAC
 P. O. Box 1186

Columbus, GA 31902

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

08-06-84

100.00

Occupation

Aggregate Year-to-Date-\$

100.00

B. Full Name, Mailing Address and ZIP Code

First KY National Corp. PAC
 P. O. Box 36000

Louisville, KY 40233

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-28-84

3000.00

Occupation

Aggregate Year-to-Date-\$

4000.00

C. Full Name, Mailing Address and ZIP Code

W & M Securities Inc. PAC
 14 Wall Street

New York, NY 10005

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-10-84

2000.00

Occupation

Aggregate Year-to-Date-\$

2000.00

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

28110.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 5
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Liberty National Bank
 DO NOT MAIL**

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

08-02-84

1516.14

Occupation

Aggregate Year-to-Date-\$ **11204.35**

B. Full Name, Mailing Address and ZIP Code

**Liberty National Bank
 DO NOT MAIL**

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

09-05-84

1367.87

Occupation

Aggregate Year-to-Date-\$ **11204.35**

C. Full Name, Mailing Address and ZIP Code

**Liberty National Bank
 DO NOT MAIL**

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

07-03-84

1262.49

Occupation

Aggregate Year-to-Date-\$ **11204.35**

D. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

4146.50

TOTAL This Period (last page this line number only)

4146.50

84020171033

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Delta Temporary, Inc 224B Executive Park Louisville, KY 40207 | Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-22-84 | 103.80 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-28-84 | 1127.70 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-11-84 | 6500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 43.37 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jeff Swedenburg P.O.Box 512 SBTS Louisville, KY 40280 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-10-84 | 75.38 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 108.53 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 284.48 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 338.21 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 92.27 |
| SUBTOTAL of Disbursements This Page (optional) | | | 8673.74 |
| TOTAL This Period (last page this line number only) | | | |

84020191084

SCHEDULE B

ITEMIZED DISBURSEMENTS

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McConnell Senate Committee

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Name of Committee (in Full)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 149.80 |
| The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-11-84 | 25000.00 |
| Mr. Don Triplett 3317 Oleanda Louisville, KY 40215 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 120.60 |
| Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-24-84 | 120.60 |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 514.17 |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-11-84 | 300.00 |
| John Conti Company P.O. Box 18289 Louisville, KY 40218 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-06-84 | 62.00 |
| K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 3442.50 |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-18-84 | 1000.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 30709.67 |
| TOTAL This Period (last page this line number only) | | | |

84020191035

SCHEDULE B

ITEMIZED DISBURSEMENTS

Line: 17

Page 3 of 32
 Page _____ of _____ for
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Name of Committee (In Full)
 McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 103.20 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-07-84 | 11.03 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-18-84 | 100.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-17-84 | 148.91 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Liberty National Bank P.O. Box 32500 Louisville, KY 40232 | Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-07-84 | 4056.83 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-03-84 | 1370.39 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 250.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Columbia Press, Inc. P. O. Box 346 Columus, IN 47202 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 2327.65 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-15-84 | 790.42 |
| SUBTOTAL of Disbursements This Page (optional) | | | 9158.43 |
| TOTAL This Period (last page this line number only) | | | |

84020191086

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| | | | |
|--|---|-------------------------|---|
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary | 07-13-84 | 449.88 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary | 09-14-84 | 1061.69 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary | 07-30-84 | 1127.70 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222 | Phones | 07-25-84 | 364.66 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Delta Temporary, Inc 224B Executive Park Louisville, KY 40207 | Temporary Help | 09-14-84 | 115.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| State Farm Insurance 760 N.W. Broad Street Murfreesboro, TN 37131 | Insurance | 08-03-84 | 133.43 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media | 09-21-84 | 5141.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Printing | 09-17-84 | 143.85 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jeff Swedenburg P.O.Box 512 SBTS Louisville, KY 40280 | Contract Labor | 09-24-84 | 91.35 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 8628.56 |
| TOTAL This Period (last page this line number only) | | | |

84020191087

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER _____
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|--|--|--|--|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-15-84 | Amount of Each Disbursement This Period 108.53 |
| B. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-28-84 | Amount of Each Disbursement This Period 142.24 |
| C. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-21-84 | Amount of Each Disbursement This Period 10.00 |
| D. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-18-84 | Amount of Each Disbursement This Period 40000.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Don Triplett 3317 Oleanda Louisville, KY 40215 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-13-84 | Amount of Each Disbursement This Period 115.58 |
| F. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-12-84 | Amount of Each Disbursement This Period 157.54 |
| G. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-13-84 | Amount of Each Disbursement This Period 300.00 |
| H. Full Name, Mailing Address and ZIP Code John Conti Company P.O. Box 18289 Louisville, KY 40218 | Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-21-84 | Amount of Each Disbursement This Period 31.00 |
| I. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Purpose of Disbursement Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-12-84 | Amount of Each Disbursement This Period 1031.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 41895.89 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage | Date (month, day, year) 08-28-84 | Amount of Each Disbursement This Period 200.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Purpose of Disbursement Travel Reimbursement | Date (month, day, year) 08-03-84 | Amount of Each Disbursement This Period 131.27 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| C. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary | Date (month, day, year) 08-15-84 | Amount of Each Disbursement This Period 97.69 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| D. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220 | Purpose of Disbursement Contract Labor | Date (month, day, year) 07-30-84 | Amount of Each Disbursement This Period 94.64 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage | Date (month, day, year) 08-16-84 | Amount of Each Disbursement This Period 200.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Purpose of Disbursement Salary | Date (month, day, year) 09-28-84 | Amount of Each Disbursement This Period 103.20 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Greg Lundberg 2724 Riedling Road Louisville, KY 40206 | Purpose of Disbursement Contract Labor | Date (month, day, year) 07-30-84 | Amount of Each Disbursement This Period 58.63 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones | Date (month, day, year) 07-17-84 | Amount of Each Disbursement This Period 985.25 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Purpose of Disbursement Contract Labor | Date (month, day, year) 09-14-84 | Amount of Each Disbursement This Period 500.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 2370.68 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Cincinnati Bell Atrium 1 Building East 4th Street Cincinnati, OH 45202 | Phone Installation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-17-84 | 350.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 790.42 |
| C. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 9.73 |
| D. Full Name, Mailing Address and ZIP Code Xerox 1250 Fairwood Ave. Columbus, OH 43267 | Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 337.47 |
| E. Full Name, Mailing Address and ZIP Code Casey Co. Board of Education Liberty, KY 42539 | Transportation Expenses for Band Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-19-84 | 252.00 |
| F. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-28-84 | 1061.69 |
| G. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 135.00 |
| H. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 378.00 |
| I. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-03-84 | 5800.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 9114.31 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED DISBURSEMENTS

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 (Use separate schedule(s) for each
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| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-25-84 | 133.40 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| New Horizon 1214 S. Sixth Street Louisville, KY 40203 | Music Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-19-84 | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 108.53 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-28-84 | 34.40 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-24-84 | 40200.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Don Triplett 3317 Oleanda Louisville, KY 40215 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-27-84 | 70.35 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-13-84 | 514.17 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-23-84 | 200.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| John Conti Company P.O. Box 18289 Louisville, KY 40218 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-05-84 | 31.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 41791.85 |
| TOTAL This Period (last page this line number only) | | | |

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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc Frankfort, KY 40601 | Purpose of Disbursement Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-25-84 | Amount of Each Disbursement This Period 187.40 |
| B. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-30-84 | Amount of Each Disbursement This Period 124.79 |
| C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-28-84 | Amount of Each Disbursement This Period 200.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-08-84 | Amount of Each Disbursement This Period 111.02 |
| E. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-30-84 | Amount of Each Disbursement This Period 97.69 |
| F. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-13-84 | Amount of Each Disbursement This Period 102.18 |
| G. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-10-84 | Amount of Each Disbursement This Period 200.00 |
| H. Full Name, Mailing Address and ZIP Code Copy Corp. 10420 Bluegrass Pkwy. Jeffersontown, KY 40299 | Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-06-84 | Amount of Each Disbursement This Period 570.39 |
| I. Full Name, Mailing Address and ZIP Code Mr. Greg Lundberg 2727 Riedling Road Louisville, KY 40206 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 8-13-84 | Amount of Each Disbursement This Period 92.96 |
| SUBTOTAL of Disbursements This Page (optional) | | | 1686.43 |
| TOTAL - This Page (last page this line number only) | | | Contract Labor |

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| New Orleans State Committ | | | |
| A. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-25-84 | Amount of Each Disbursement This Period 1369.09 |
| B. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Purpose of Disbursement Expense Reimburse- ment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-19-84 | Amount of Each Disbursement This Period 33.12 |
| C. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-14-84 | Amount of Each Disbursement This Period 790.42 |
| D. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-26-84 | Amount of Each Disbursement This Period 459.61. |
| E. Full Name, Mailing Address and ZIP Code Xerox 1250 Fairwood Ave. Columbus, OH 43267 | Purpose of Disbursement Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-14-84 | Amount of Each Disbursement This Period 337.47 |
| F. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Purpose of Disbursement Expense Reimburse- ment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-13-84 | Amount of Each Disbursement This Period 187.53 |
| G. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222 | Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-06-84 | Amount of Each Disbursement This Period 441.34 |
| H. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-03-84 | Amount of Each Disbursement This Period 5800.00 |
| I. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194 | Purpose of Disbursement Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-14-84 | Amount of Each Disbursement This Period 30.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 9448.58 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

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| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Office Furniture Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-06-84 | 571.72 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-12-84 | 50.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Bisney Bowes Credit Corporation P.O. Box 38466 Louisville, KY 40233 | Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 695.94 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-28-84 | 10.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 275.38 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 502.16 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Don Triplett 3317 Oleanda Louisville, KY 40215 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-10-84 | 58.63 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 59.37 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-28-84 | 514.17 |
| SUBTOTAL of Disbursements This Page (optional) | | | 2737.37 |
| TOTAL This Period (last page this line number only) | | | |

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|--|---|-------------------------|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster | Postage | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 500.00 |
| Louisville, KY 40201 | | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Cybernetics & Systems, Inc. 500 Water Street | Computer Services | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-06-84 | 300.00 |
| Jacksonville, FL 32202 | | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Kentucky Press Service, Inc 332 Capitol Ave. | Clipping Service | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 74.18 |
| Frankfort, KY 40601 | | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Debbie Ratliff 8611 Attu Lane | Contract Labor | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-13-84 | 95.48 |
| Louisville, KY 40291 | | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster | Postage | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-07-84 | 300.00 |
| Louisville, KY 40201 | | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-15-84 | 103.20 |
| | | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sara Kent Lemonds 2326 Broadmeade Road | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 97.69 |
| Louisville, KY 40205 | | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220 | Contract Labor | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-27-84 | 117.25 |
| | | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster | Postage | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-28-84 | 200.00 |
| Louisville, KY 40201 | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 1787.80 |
| TOTAL This Period (last page this line number only) | | | |

8402019109

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218 | Printing and Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 113.57 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Greg Lundberg 2724 Riedling Road Louisville, KY 40206 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-27-84 | 100.50 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 961.47 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-24-84 | 2.25 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-28-84 | 790.42 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-15-84 | 459.61 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 92.96 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-15-84 | 1127.70 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-17-84 | 416.00 |
| SUSTOTAL of Disbursements This Page (optional) | | | 4064.48 |
| TOTAL This Period (last page this line number only) | | | |

94020191096

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|---|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-05-84 | 5800.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194 | Delivery Charges | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 25.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Office Furniture | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-05-84 | 285.86 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 108.53 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233 | Office Equipment | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 347.97 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 92.27 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Mary Gabriel Harpring 3610 Glencreek Lane Louisville, KY 40218 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 275.38 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 12.01 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Don Triplett 3317 Oleanda Louisville, KY 40215 | Contract Labor | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-24-84 | 70.38 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7017.40 |
| TOTAL This Period (last page this line number only) | | | |

84020191097

SCHEDULE B

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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc. | Office Supplies | 07-25-84 | 66.52 |
| 433 East Market Street | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Louisville, KY 40202 | | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Palm Beach Plaza Center Assos. | Rent | 07-23-84 | 2024.69 |
| 1941 Bishop Lane, Suite 406 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Louisville, KY 40218 | | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster | Postage | 07-25-84 | 500.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Louisville, KY 40201 | | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Cybernetics & Systems, Inc. | Computer Time | 09-05-84 | 350.00 |
| 500 Water Street | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Jacksonville, FL 32202 | | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Kentucky Press Service, Inc | Clipping Service | 08-06-84 | 112.36 |
| 332 Capitol Ave. | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Frankfort, KY 40601 | | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Debbie Ratliff | Contract Labor | 08-27-84 | 108.88 |
| 8611 Attu Lane | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Louisville, KY 40291 | | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster | Postage | 09-07-84 | 300.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Louisville, KY 40201 | | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack | Travel Reimbursement | 08-16-84 | 140.32 |
| 3201 Leith Lane | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Apartment 715 | | | |
| Louisville, KY 40218 | | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sara Kent Lemonds | Expense Reimbursement | 09-19-84 | 200.00 |
| 2326 Broadmeade Road | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Louisville, KY 40205 | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 3802.77 |
| TOTAL This Period (last page this line number only) | | | |

840201910908

SCHEDULE B

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|--|--|--|---|
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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-10-84 | Amount of Each Disbursement This Period 82.08 |
| B. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218 | Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-06-84 | Amount of Each Disbursement This Period 106.76 |
| C. Full Name, Mailing Address and ZIP Code Lexington Center Corporation 430 W. Vine Street Lexington, KY 40507 | Purpose of Disbursement Room Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-05-84 | Amount of Each Disbursement This Period 400.00 |
| D. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-21-84 | Amount of Each Disbursement This Period 71.85 |
| E. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-28-84 | Amount of Each Disbursement This Period 500.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-25-84 | Amount of Each Disbursement This Period 12.50 |
| G. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-30-84 | Amount of Each Disbursement This Period 459.61 |
| H. Full Name, Mailing Address and ZIP Code Datapoint Corporation P.O. Box 93192 Chicago, IL 60673 | Purpose of Disbursement Computer Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-03-84 | Amount of Each Disbursement This Period 5808.13 |
| I. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-13-84 | Amount of Each Disbursement This Period 94.64 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7535.57 |
| TOTAL This Period (last page this line number only) | | | |

84020191099

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|--|--|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell State Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road | Expense Reimburse- | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-28-84 | 168.91 |
| BOH State Committee | | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| A.B.C. Printing 3520 College Drive | Printing | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-03-84 | 2257.50 |
| Louisville, KY 40299 | | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane | Printing | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-07-84 | 312.85 |
| Louisville, KY 40218 | | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Morgan Equipment Company P.O. Box 7802 | Transportation Costs | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-12-84 | 3442.46 |
| San Francisco, CA 94120 | | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Allen-Martin Video Productions 9701 Taylorsville Road | Studip Taping | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-03-84 | 633.50 |
| Jeffersonton, KY 40299 | | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Faversham World Travel 2843 Brownsboro Road | Airplane Tickets | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-03-84 | 978.00 |
| Louisville, KY 40206 | | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. | Contract Labor | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 07-02-84 | 42.35 |
| Louisville, KY 40222 | | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-28-84 | 108.53 |
| Louisville, KY 40218 | | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Pitney Bowes Credit Corporation P.O. Box 38460 | Office Equipment | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-18-84 | 347.97 |
| Louisville, KY 40233 | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 8292.07 |
| TOTAL This Period (last page this line number only) | | | |

04020191100

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (In Full)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| McConnell Senate Committee Mr. Jack Telle 2215 Talbott Ave. | Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-14-84 | 92.27 |
| Bo Full Name, Mailing Address and ZIP Code Ms. Mary Gabriel Harpring 3610 Glencreek Lane | Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-16-84 | 183.59 |
| Bo Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 221.74 |
| D. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 43.22 |
| E. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-16-84 | 2024.69 |
| F. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-06-84 | 200.00 |
| G. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-10-84 | 76.19 |
| H. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601 | Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-05-84 | 97.37 |
| I. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-10-84 | 85.43 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3024.50 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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| | | | |
|--|--|---|--|
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senat ommittee | | | |
| A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-12-84 | Amount of Each Disbursement This Period 500.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715- Louisville, KY 40218 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-24-84 | Amount of Each Disbursement This Period 87.50 |
| C. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-28-84 | Amount of Each Disbursement This Period 97.69 |
| D. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Apartment P-5 Louisville, KY 40220 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-25-84 | Amount of Each Disbursement This Period 117.26 |
| E. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-21-84 | Amount of Each Disbursement This Period 20.90 |
| F. Full Name, Mailing Address and ZIP Code Lexington Center Corporation 430 W. Vine Street Lexington, KY 40507 | Purpose of Disbursement Room Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-18-84 | Amount of Each Disbursement This Period 500.00 |
| G. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-31-84 | Amount of Each Disbursement This Period 1764.80 |
| H. Full Name, Mailing Address and ZIP Code Ms. Terry Wallingford 3574 Tealwing C Cincinnati, OH 45211 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-10-84 | Amount of Each Disbursement This Period 100.50 |
| I. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-13-84 | Amount of Each Disbursement This Period 1061.69 |
| SUBTOTAL of Disbursements This Page (optional) | | | 4250.34 |
| TOTAL This Period (last page this line number only) | | | |

84020191102

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Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|---|--|--|---|
| A. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-14-84 | Amount of Each Disbursement This Period 459.61 |
| B. Full Name, Mailing Address and ZIP Code Datapoint Corporation P.O. Box 93192 Chicago, IL 60673 | Purpose of Disbursement Computer Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-17-84 | Amount of Each Disbursement This Period 191.53 |
| C. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-27-84 | Amount of Each Disbursement This Period 117.25 |
| D. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-30-84 | Amount of Each Disbursement This Period 1127.70 |
| E. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-21-84 | Amount of Each Disbursement This Period 220.50 |
| F. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-07-84 | Amount of Each Disbursement This Period 51.40 |
| G. Full Name, Mailing Address and ZIP Code Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299 | Purpose of Disbursement Recording Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-14-84 | Amount of Each Disbursement This Period 25.25 |
| H. Full Name, Mailing Address and ZIP Code Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206 | Purpose of Disbursement Airplane Tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-05-84 | Amount of Each Disbursement This Period 533.00 |
| I. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-30-84 | Amount of Each Disbursement This Period 301.46 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3027.70 |
| TOTAL This Period (last page this line number only) | | | |

8402019103

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ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Biomedical Communications Center Health Sciences Center University of Louisville Louisville, KY 40292 | Dubbing Tapes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 132.50 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Don Garton 1044 Alta Vista Road Louisville, KY 40205 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 119.76 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 27500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 7.75 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 514.17 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-06-84 | 369.05 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Hyatt Corporation Lexington Center Lexington, KY 40506 | Room Rental and Food Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 3010.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-12-84 | 2024.69 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-10-84 | 200.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 33877.92 |
| TOTAL This Period (last page this line number only) | | | |

84020191104

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Name of Committee (in Full)
 McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-10-84 | 131.91 |
| B. Full Name, Mailing Address and ZIP Code Kentucky State Treasurer Frankfort, KY 40601 | Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 1440.07 |
| C. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-24-84 | 105.57 |
| D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 500.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 103.20 |
| F. Full Name, Mailing Address and ZIP Code Liberty National Bank P.O. Box 32500 Louisville, KY 40232 | Check Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-06-84 | 17.10 |
| G. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 23.63 |
| H. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-17-84 | 986.17 |
| I. Full Name, Mailing Address and ZIP Code Mr. Terry Wallingford 3974 Yearling Ct. Cincinnati, OH 45211 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-24-84 | 120.60 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3428.25 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| | Salary | | |
| Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-30-84 | 1061.69 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Salary | | |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-28-84 | 459.61 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Computer Equipment | | |
| Datapoint Corporation P.O. Box 93192 Chicago, IL 60673 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 2399.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Contract Labor | | |
| Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-10-84 | 46.90 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Travel Reimbursement | | |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-10-84 | 147.15 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Printing | | |
| A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 37.28 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Printing | | |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-11-84 | 414.12 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Airplane Ticket | | |
| Faversham World Travel 2843 Brownsboro Road Louisville, KY 40206 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 448.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Contract Labor | | |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 79.04 |
| SUBTOTAL of Disbursements This Page (optional) | | | 5092.79 |
| TOTAL This Period (last page this line number only) | | | |

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Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| V. Lance Tarrance & Associates 3845 West FM 1960, Suite 400 Houston, TX 77068 | Research Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-13-84 | 12710.00 |
| B. Full Name, Mailing Address and ZIP Code Biomedical Communications Center Health Sciences Center University of Louisville Louisville, KY 40292 | Dubbing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 53.75 |
| C. Full Name, Mailing Address and ZIP Code Mr. Don Garton 1044 Alta Vista Road. Louisville, KY 40205 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-13-84 | 105.53 |
| D. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-10-84 | 27500.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-28-84 | 92.27 |
| F. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-15-84 | 514.17 |
| G. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-21-84 | 321.74 |
| H. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233 | Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 59.25 |
| I. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-10-84 | 200.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 41556.71 |
| TOTAL This Period (last page this line number only) | | | |

8402019107

SCHEDULE B

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 90.98 |
| B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 500.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 139.46 |
| D. Full Name, Mailing Address and ZIP Code Liberty National Bank P.O. Box 32500 Louisville, KY 40232 | Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-09-84 | 4086.62 |
| E. Full Name, Mailing Address and ZIP Code The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218 | Purpose of Disbursement Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 212.95 |
| F. Full Name, Mailing Address and ZIP Code Mason-Dixon Business Forms, Inc. 431 South Broadway Lexington, KY 40508 | Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 482.26 |
| G. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254 | Purpose of Disbursement Long Distance Calls Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 757.07 |
| H. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 10.00 |
| I. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 500.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 6779.34 |
| TOTAL This Period (last page this line number only) | | | |

8402010100

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|--|--|--|---|
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Delta Temporary, Inc 224B Executive Park Louisville, KY 40225 | Purpose of Disbursement Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-06-84 | Amount of Each Disbursement This Period 117.88 |
| B. Full Name, Mailing Address and ZIP Code Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40220 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-24-84 | Amount of Each Disbursement This Period 46.92 |
| C. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-12-84 | Amount of Each Disbursement This Period 45.35 |
| D. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-21-84 | Amount of Each Disbursement This Period 33.60 |
| E. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-12-84 | Amount of Each Disbursement This Period 86.00 |
| F. Full Name, Mailing Address and ZIP Code Natl. Republican Senatorial Comm 404 C Street, N.E. Washington, DC 20002 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-30-84 | Amount of Each Disbursement This Period 1725.00 |
| G. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-16-84 | Amount of Each Disbursement This Period 113.79 |
| H. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-17-84 | Amount of Each Disbursement This Period 139.15 |
| I. Full Name, Mailing Address and ZIP Code V. Lance Tarrance & Associates 3845 West FM 1960, Suite 400 Houston, TX 77068 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-05-84 | Amount of Each Disbursement This Period 676.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 2983.69 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Biomedical Communications Center Health Sciences Center University of Louisville Louisville, KY 40202 | Dubbing Tapes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-17-84 | 12.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Don Garton 1044 Alta Vista Road Louisville, KY 40205 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-27-84 | 60.30 |
| C. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-04-84 | 17675.12 |
| D. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-15-84 | 92.27 |
| E. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-15-84 | 49.45 |
| F. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-14-84 | 494.38 |
| G. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 38390 Louisville, KY 40233 | Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 09-14-84 | 270.00 |
| H. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 08-16-84 | 500.00 |
| I. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): XX | 07-23-84 | 104.47 |
| SUBTOTAL of Disbursements This Page (optional) | | | 19257.99 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

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|--|---|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 402 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 97.69 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-25-84 | 200.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| 3201 Leith Lane <i>Terry Carmack</i> Apartment 715 Louisville, KY 40218 | General Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 103.20 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Liberty National Bank P.O. Box 32500 Louisville, KY 40232 | Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 289.93 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Sullivan Screen Print Co., Inc. 3808 Fitzgerald Rd. Louisville, KY 40216 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-27-84 | 2009.04 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Copy Shop 1941 Bishop Lane Suite 106 Louisville, KY 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 63.70 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 788.98 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| <i>Sprint</i> Accounts Receivable Dept. Pittsburg, PA 15254 | Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-06-84 | 691.71 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Gene Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-15-84 | 1061.69 |
| SUBTOTAL of Disbursements This Page (optional) | | | 5305.94 |
| TOTAL This Period (last page this line number only) | | | |

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| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 627.70 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Delta Temporary, Inc 224B Executive Park Louisville, KY 40207 | Temporary Help | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-13-84 | 100.63 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 1127.70 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Printing | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 220.50 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Printing | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 26.72 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jeff Swedenburg P.O.Box 512 SBTS Louisville, KY 40280 | Contract Labor | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-27-84 | 65.33 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 108.53 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 284.48 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Travel Reimbursement | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-27-84 | 448.93 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3010.52 |
| TOTAL This Period (last page this line number only) | | | |

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|--|---|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-13-84 | 92.27 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116 | Consulting Fee | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-16-84 | 3000.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group, Inc. P.O. Box 50190 Indianapolis, IN 46250 | Media | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-07-84 | 11184.67 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Treasurer, Ky Unemployment Ins. Frankfort, KY 40621 | Payroll Taxes | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 831.93 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503 | Contract Labor | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-10-84 | 100.50 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Petty Cash | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-28-84 | 156.83 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-09-84 | 200.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | Office Supplies | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-18-84 | 81.54 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Quality Inn-Riverview Covington, KY 41000 | Room rental | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-03-84 | 75.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 15722.74 |
| TOTAL This Period (last page this line number only) | | | |

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|--|--|--|---|
| Name of Committee (In Full) | | | |
| McCormack Senate Committee A. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-16-84 Amount of Each Disbursement This Period 200.00 |
| Louisville, KY 40201 B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-27-84 Amount of Each Disbursement This Period 106.00 |
| Louisville, KY 40218 C. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-30-84 Amount of Each Disbursement This Period 97.69 |
| Louisville, KY 40205 D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-18-84 Amount of Each Disbursement This Period 200.00 |
| Louisville, KY 40201 E. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 09-17-84 Amount of Each Disbursement This Period 82.00 |
| Louisville, KY 40218 F. Full Name, Mailing Address and ZIP Code Liberty National Bank P.O. Box 32500 Louisville, KY 40232 | | Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-03-84 Amount of Each Disbursement This Period 4037.82 |
| Louisville, KY 40232 G. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-30-84 Amount of Each Disbursement This Period 1000.00 |
| Louisville, KY 40291 H. Full Name, Mailing Address and ZIP Code Commissioners of the Sinking Fund 617 West Jefferson St. Louisville, KY 40202 | | Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 08-03-84 Amount of Each Disbursement This Period 788.07 |
| Louisville, KY 40202 I. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 07-30-84 Amount of Each Disbursement This Period 790.42 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7302.00 |
| TOTAL This Period (last page this line number only) | | | |

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ITEMIZED DISBURSEMENTS

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|--|--|--------------------------------|--|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Sprint Accounts Receivable Dept. Pittsburg, PA 15254 | Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-05-84 | 780.51 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-30-84 | 1061.69 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 07-25-84 | 3.47 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Delta Temporary, Inc 224B Executive Park Louisville, KY 40207 | Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 08-15-84 | 77.63 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-14-84 | 9.45 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Assoc of Amer. Phys & Surg. PAC Mr. Charles Ord 5201-B Lyngate Court Burke, VA 22015 | In-Kind Mailing List - Names Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-30-84 | 2360.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | In-Kind Campaign Car Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-30-84 | 300.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, KY 40243 | In-Kind Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-30-84 | 625.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Nat. Republican Senatorial Com 404 C. Street, N.E. Washington, DC 20002 | In-Kind Reception #2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 09-30-84 | 144.32 |
| SUBTOTAL of Disbursements This Page (optional) | | | 5362.07 |
| TOTAL This Period (last page this line number only) | | | 358698.10 |

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| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. John P. Blevins | Refund due to excessive contribution | 08-07-84 | 24.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. George Huck | Refund due to Corporate Check | 09-29-84 | 100.00 |
| Olympias Farms | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | |
| 940 W. Washington Blvd. | <input type="checkbox"/> Other (specify): | | |
| Los Angeles, CA 90015 | | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| | <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 124.00 |
| | | | 124.00 |
| TOTAL This Period (last page this line number only) | | | |

8402019116

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page _____ of _____ for
LINE NUMBER _____
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 20(c)

Page 1 of 1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

W & M Securities PAC
 14 Wall Street

New York, NY 10005

Purpose of Disbursement

Refund

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

Date (month,
 day, year)

09-26-84

Amount of Each
 Disbursement This Period

1000.00

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: ☐ Primary ☐ General
☐ Other (specify):

Date (month,
 day, year)

Amount of Each
 Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

84020191117

REPORTS OF RECEIPTS AND DISBURSEMENTS
For Authorized Committee

SECRETARY OF THE SENATE

1984 OCT 25 AM 9 53

H.D.

(Summary Page)

ALIGN AREA

ALIGN AREA

1 Name of Committee McConnell Senate Committee 2 FEC Identification Number C00155051
Address (Number and Street) P. O. Box 1496 3 Is this Report an Amendment? ☐ YES ☒ NO
City, State and Zip Code Louisville, KY 40201 ☐ Check if address is different than previously reported.

4. TYPE OF REPORT
☐ April 15 Quarterly Report ☒ Twelfth day report preceding General (Type of Election)
☐ July 15 Quarterly Report election on November 6, 1984 in the State of KY
☐ October 15 Quarterly Report ☐ Thirtieth day report following the General Election on _____ in the State of _____
☐ January 31 Year End Report ☐ Termination Report
☐ July 31 Mid Year Report (Non-election Year Only)

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

| SUMMARY | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|--|-------------------------|-----------------------------------|
| 5. Covering Period | <u>October 1, 1984</u> through <u>October 17, 1984</u> | | |
| 6. Net Contributions (other than loans) | | | |
| (a) Total Contributions (other than loans) (From Line 11 (e)) | | 159,759 | 824,869 |
| (b) Total Contribution Refunds (from Line 20 (d)) | | | 1,324 |
| (c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a)) | | 159,759 | 823,545 |
| 7. Net Operating Expenditures | | 215,345 | 1,165,444 |
| (a) Total Operating Expenditures (from Line 17) | | | 579 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | | | |
| (c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a)) | | 215,345 | 1,164,865 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | | 61,450 | |
| 9. Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D) | | | |
| 10. Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D) | | 17,022 | |

Total Receipts Since Inception \$1,482,058

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-523-4068

Larry I. Steinberg
Type or Print Name of Treasurer

Larry I. Steinberg
SIGNATURE OF TREASURER

October 23, 1984
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

84020240979

DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)

| | | | |
|--|---------|---|--|
| Name of Committee (in Full) McConnell Senate Committee | | Report Covering the Period: From: October 1, 1984 to: October 17, 1984 | |
| | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| I. RECEIPTS | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: | | | |
| (a) Individuals/Persons Other Than Political Committees | 126,060 | 690,828 | 11 (a) |
| (b) Political Party Committees | 272 | 7,168 | 11 (b) |
| (c) Other Political Committees | 33,427 | 126,873 | 11 (c) |
| (d) The Candidate | | | 11 (d) |
| (e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)). | 159,759 | 824,869 | 11 (e) |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | 12 |
| 13. LOANS: | | 25,000 | 13 (a) |
| (a) Made or Guaranteed by the Candidate | | | 13 (b) |
| (b) All Other Loans | | 25,000 | 13 (c) |
| (c) TOTAL LOANS (add 13 (a) and 13 (b)). | | 579 | 14 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 670 | 12,377 | 15 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | | 16 |
| 16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15) | 160,429 | 862,825 | 16 |
| II. DISBURSEMENTS | | | |
| 17. OPERATING EXPENDITURES | 215,345 | 1,165,444 | 17 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | 18 |
| 19. LOAN REPAYMENTS: | | 25,000 | 19 (a) |
| (a) Of Loans Made or Guaranteed by the Candidate | | | 19 (b) |
| (b) Of All Other Loans | | 25,000 | 19 (c) |
| (c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)). | | | |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | 324 | 20 (a) |
| (a) Individuals/Persons Other Than Political Committees | | | 20 (b) |
| (b) Political Party Committees | | 1,000 | 20 (c) |
| (c) Other Political Committees | | 1,324 | 20 (d) |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c)) | | | |
| 21. OTHER DISBURSEMENTS | | | 21 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21) | 215,345 | 1,191,768 | 22 |
| III. CASH SUMMARY | | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | 116,366 | 23 |
| 24. TOTAL RECEIPTS THIS PERIOD (From Line 16) | \$ | 160,429 | 24 |
| 25. SUBTOTAL (Add Line 23 and Line 24) | \$ | 276,795 | 25 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) | \$ | 215,345 | 26 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) | \$ | 61,450 | 27 |

SCHEDULE D

(Revised 3/80)

**DEBTS AND OBLIGATIONS
Excluding Loans**

 Page 1 of 2 for
LINE NUMBER 10
 (Use separate schedules
 for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Ailes Communications 456 West 43rd Street New York, NY 10036 | 5,800 | 26,572 | 32,372 | |
| Nature of Debt (Purpose): Communications training | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| ABC Printing Company 3520 College Drive Jeffersontown, KY 40299 | 1,245 | 634 | 1,245 | 634 |
| Nature of Debt (Purpose): Printing | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Judge Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | 908 | | | 908 |
| Nature of Debt (Purpose): Airplane Tickets | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| South Central Bell P. O. Box 32440 Louisville, KY 40232 | 1,443 | 2,532 | 1,443 | 2,532 |
| Nature of Debt (Purpose): Telephone service | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | 4,049 | | | 4,049 |
| Nature of Debt (Purpose): Office rent | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Datapoint Corporation P. O. Box 93192 Chicago, Illinois 60673 | 4,798 | 2,399 | | 7,197 |
| Nature of Debt (Purpose): Computer equipment | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | \$15,320 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS (from Schedule C last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to corresponding line of Summary Page (last page only) | | | | |

84020240931

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor K.S. Air, Inc. P. O. Box 7183 Louisville, KY 40207 | 1,160 | 4,969 | 6,129 | |
| Nature of Debt (Purpose): Airplane rental | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299 | 119 | | 59 | 60 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233 | 348 | | | 348 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Americall Louisville 10000 Shelbyville Road Louisville, KY 40123 | 1,090 | 746 | 1,090 | 746 |
| Nature of Debt (Purpose): Long Distance Calls | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | 505 | 548 | 505 | 548 |
| Nature of Debt (Purpose): Office Supplies | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116 | 607 | 89 | 696 | |
| Nature of Debt (Purpose): travel reimbursement | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | \$1,702 |
| 2) TOTAL This Period (last page this line only) | | | | \$17,022 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |

84020240902

SCHEDULE A

ITEMIZED RECEIPTS

11 (a)
Page _____ of _____ for
LINE NUMBER _____
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
McCracken Senate Committee

| Name of Employer | | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|--|---|
| A. Full Name, Mailing Address and ZIP Code <u>Henry V. Heuser, Sr.</u> <u>1400 Willow</u> <u>Louisville, KY 40204</u> | | <u>Henry Vogt Machine Co.</u> <u>10-16-84</u> | <u>500.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ | | Occupation <u>President</u> | Aggregate Year-to-Date--\$ <u>500.00</u> |
| B. Full Name, Mailing Address and ZIP Code <u>Mr. J. S. Talbott, Jr.</u> <u>1535 Lakewood Ct., West</u> <u>Lexington, KY 40502</u> | | <u>Information Requested</u> <u>10-16-84</u> | <u>500.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ | | Occupation <u>Information Requested</u> | Aggregate Year-to-Date--\$ <u>550.00</u> |
| C. Full Name, Mailing Address and ZIP Code <u>Dr. Charles B. Barrett</u> <u>8221 Wolf Pen Branch Road</u> <u>Prospect, KY 40059</u> | | <u>self</u> <u>10-17-84</u> | <u>1000.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ | | Occupation <u>Dentist</u> | Aggregate Year-to-Date--\$ <u>1000.00</u> |
| D. Full Name, Mailing Address and ZIP Code <u>Mr. Neil Huffman</u> <u>7501 Hunting Creek Drive</u> <u>Prospect, KY 40059</u> | | <u>Self Employed</u> <u>10-17-84</u> | <u>50.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ | | Occupation <u>Auto Dealer</u> | Aggregate Year-to-Date--\$ <u>850.00</u> |
| E. Full Name, Mailing Address and ZIP Code <u>Mr. J. R. Vaughan</u> <u>333 S. Hope Street, 38th Floor</u> <u>Los Angeles, CA 90071</u> | | <u>Information Requested</u> <u>10-17-84</u> | <u>250.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ | | Occupation <u>Information Requested</u> | Aggregate Year-to-Date--\$ <u>250.00</u> |
| F. Full Name, Mailing Address and ZIP Code <u>Mrs. Edna Booth</u> <u>U.S. Highway 42</u> <u>Box 213</u> <u>Union, KY 41091</u> | | <u>Self employed</u> <u>10-08-84</u> | <u>100.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ | | Occupation <u>Homemaker</u> | Aggregate Year-to-Date--\$ <u>600.00</u> |
| G. Full Name, Mailing Address and ZIP Code <u>Mr. Jimmy A. Kincer</u> <u>15025 Bircham Road</u> <u>Louisville, KY 40243</u> | | <u>Copy Corporation</u> <u>10-17-84</u> | <u>112.50</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____ | | Occupation <u>owner</u> | Aggregate Year-to-Date--\$ <u>1612.50</u> |
| SUSTOTAL of Receipts This Page (optional) | | | <u>2512.50</u> |
| TOTAL This Period (last page this line number only) | | | |

84020240983

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 28 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles F. Young
 133A Mahan Avenue

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Charles Young Insurance

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt this Period

100.00

Occupation

Insurance

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Rowland D. Miller
 6408 Longview Lane

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-03-84

Amount of Each
 Receipt This Period

30.00

Occupation

Architect

Aggregate Year-to-Date-\$

230.00

C. Full Name, Mailing Address and ZIP Code

Mr. James P. Cowles
 P. O. Box 2160

Spokane, WA 99203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Inland Empire Paper Company

Date (month,
 day, year)

10-05-84

Amount of Each
 Receipt This Period

100.00

Occupation

Executive

Aggregate Year-to-Date-\$

350.00

D. Full Name, Mailing Address and ZIP Code

Mr. John T. Nelson
 7647 National Turnpike

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-15-84

Amount of Each
 Receipt This Period

50.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

300.00

E. Full Name, Mailing Address and ZIP Code

Mr. Patrick A. Doheny
 124 El Camino

Beverly Hills, CA 90212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

350.00

Occupation

investor

Aggregate Year-to-Date-\$

350.00

F. Full Name, Mailing Address and ZIP Code

Ms. Opal Ann Parrott
 1109 N. Main

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Kentucky Mountain Trading Co.

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt This Period

100.00

Occupation

owner

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Mr. Duffy L. Ford
 200 South Second Street

#10
 Richmond, KY 40475

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-04-84

Amount of Each
 Receipt This Period

250.00

Occupation

C P A

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

980.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 28 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|-----------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Alton Taylor Route 1 Hanson, KY 42413 | Information Requested | 10-04-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Information Requested | |
| | | Aggregate Year-to-Date-\$ | 300.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. & Mrs. Bruce Barton Route 1, Box 364 Corbin, KY 40701 | Self/Self | 10-05-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Doctor/Homemaker | |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Herbert R. Booth U.S. Hwy 42 Box 213 Union, KY 41091 | self | 10-08-84 | 400.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Doctor | |
| | | Aggregate Year-to-Date-\$ | 900.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Peggy W. Kirk P. O. Box 331 Inez, KY 41224 | self | 10-15-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | homemaker | |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Paul M. Lockhart 4301 Taylorsville Road Louisville, KY 40220 | self | 10-16-84 | 350.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | homemaker | |
| | | Aggregate Year-to-Date-\$ | 350.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Jane Clark 1400 Willow-2101 Louisville, KY 40204 | self employed | 10-11-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | homemaker | |
| | | Aggregate Year-to-Date-\$ | 750.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Willodyne Miller 205 Perryman Road Louisville, KY 40207 | Information Requested | 10-12-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Executive Director | |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2850.00 |
| TOTAL This Period (last page this line number only) | | | |

84020240936

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 28 for
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles W. Crawford
 3365 Padaro Lane

Carpinteria, CA 93013

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-17-84

Amount of Each
Receipt this Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code

Dr. Garry W. Neltner, D.P.M.
 3117 Hudnall Avenue

Covington, KY 41017

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date-\$

1300.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Robert M. Duncan
 Box 331

Inez, KY 41224

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

1000.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Ms. Opal Ann Parrott
 1109 N. Main

London, KY 40741

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Kentucky Mountain Trading Co.

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

200.00

Occupation

owner

Aggregate Year-to-Date-\$

400.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Juliette C. Forrester
 3716 Fairway Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. John R. Raker
 3109 Springcrest Drive

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. J. H. Graves, III
 5081 Winchester Pike

Lexington, KY 40511

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Second National Bank

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

500.00

Occupation

Chairman of the Board

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

4450.00

TOTAL This Period (last page this line number only)

8402024037

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Ruth Robinson
 101 Woodland Drive

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt this Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth W. Hardwick
 128 Council Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-12-84

Amount of Each
 Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date-\$

750.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Louise Lyman Shaver
 3105 Boxhill Lane

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-09-84

Amount of Each
 Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. James H. Adams
 1545 Wilshire Boulevard

Los Angeles, CA 90017

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Henry V. Heuser, Jr.
 3902 Napanee Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-09-84

Amount of Each
 Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Kenneth O. Taylor
 Rt. 4, Box 139C

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Cimmeron Mining

Date (month,
 day, year)

10-10-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Nelda Barton
 1311 7th Street Road

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Health Systems

Date (month,
 day, year)

10-15-84

Amount of Each
 Receipt This Period

250.00

Occupation

Nursing Homes

Aggregate Year-to-Date-\$

450.00

SUBTOTAL of Receipts This Page (optional)

3350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. J. Glennon Walsh
 4702 Crofton Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt this Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Diana L. Boyd
 R. R. 3, Box 239

Georgetown, IN 47122

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert L. Kirkland
 609 Raintree Road

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

1000.00

Occupation

banker

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Fred V. Lucas
 207 W. 7th St.

London, KY 40741

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

100.00

Occupation

retired

Aggregate Year-to-Date-\$

350.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Polly Z. Cochran
 25 Stone Bridge Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

400.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Thomas W. Moller
 P. O. Box 2059
 111 Church Street
 Lexington, KY 40594

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Interest Rate Management, Inc.

Date (month,
day, year)

10-11-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

1250.00

G. Full Name, Mailing Address and ZIP Code

Mr. George P. Crounse
 105 Sycamore Drive

Paducah, KY 42001

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-02-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

4250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. R. H. Hargrove
525 Southfield Road

Shreveport, LA 71106

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

housewife

Aggregate Year-to-Date—\$

10-17-84

550.00

Amount of Each
Receipt this Period

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Weldon Shouse
2033 Lakeside Drive

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

Attorney

Aggregate Year-to-Date—\$

10-16-84

500.00

Amount of Each
Receipt This Period

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Morgan Adams, Jr.
1545 Wilshire Boulevard

Los Angeles, CA 90017

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date—\$

10-17-84

250.00

Amount of Each
Receipt This Period

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. John G. Heyburn, II
55 Hill Road

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Brown, Todd & Heyburn

Occupation

Lawyer

Aggregate Year-to-Date—\$

10-16-84

800.00

Amount of Each
Receipt This Period

500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Wayne G. Basler
P. O. Box 929
1400 Lincoln Avenue
Kingsport, TN 37662

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

AFG Industries, Inc.

Occupation

President

Aggregate Year-to-Date—\$

10-17-84

250.00

Amount of Each
Receipt This Period

250.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Ina Brown Johnson
14 River Hill Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Occupation

Homemaker

Aggregate Year-to-Date—\$

10-03-84

1750.00

Amount of Each
Receipt This Period

750.00

G. Full Name, Mailing Address and ZIP Code

Ms. Catherine Y. Warner
411 Mockingbird Valley Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

student

Aggregate Year-to-Date—\$

10-12-84

1000.00

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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|---|---------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Ms. Sue Kiser Route 1, Parrent Lane Box 340 Finchville, KY 40022 | Fairlight Valley Farm | 10-08-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Owner | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Carroll L. Lurding P.O. Box 7461 326 Mockingbird Hill Rd. Louisville, KY 40207 | self | 10-09-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | architect | | |
| | Aggregate Year-to-Date-\$ | 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Ruby Coleman Box 2009 Pikeville, KY 41501 | Self employed | 10-09-84 | 750.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Homemaker | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Larry D. Moon 414 Mockingbird Hill Road Louisville, KY 40207 | Information Requested | 10-16-84 | 350.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Information Requested | | |
| | Aggregate Year-to-Date-\$ | 350.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Walden Cuddy Box 168 Millstone, KY 41838 | grocery store | 10-03-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | owner | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Phillip B. Newman 440 Lightfoot Road Louisville, KY 40207 | none | 10-09-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Retired | | |
| | Aggregate Year-to-Date-\$ | 300.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles Elza Route 1, Box 136 London, KY 40741 | Information Requested | 10-08-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Information Requested | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| SUBTOTAL of Receipts This Page (optional)..... | | | 3800.00 |
| TOTAL This Period (last page this line number only) | | | |

9402024092

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. W. V. Pierce
 822 North Ft. Thomas Avenue

Fort Thomas, KY 41075

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired physician

Aggregate Year-to-Date-\$

10-17-84

240.00

Amount of Each
 Receipt this Period

30.00

B. Full Name, Mailing Address and ZIP Code

Mr. Samuel R. Rechter
 1906 Decatur Drive

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Rogers Group Inc.

Occupation

Chairman of the Board

Aggregate Year-to-Date-\$

10-12-84

1000.00

Amount of Each
 Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Charles J. Guelda, Jr.
 314 Burnswick Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

civil service

Occupation

employee

Aggregate Year-to-Date-\$

10-12-84

1000.00

Amount of Each
 Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Diane F. Royce
 34 Stonebridge Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$

10-09-84

250.00

Amount of Each
 Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. George L. Hart
 Rural Route Box 171

Eddyville, KY 42038

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

Retired

Aggregate Year-to-Date-\$

10-09-84

450.00

Amount of Each
 Receipt This Period

200.00

F. Full Name, Mailing Address and ZIP Code

Mr. James T. Sleadd
 4604 Lowe Road

Louisville, KY 40220

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

10-16-84

350.00

Amount of Each
 Receipt This Period

350.00

G. Full Name, Mailing Address and ZIP Code

Mr. William A. Adams

get correct address, KY 40000

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

10-10-84

1000.00

Amount of Each
 Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3830.00

TOTAL This Period (Use Page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Martha Heyburn
55 Hill Road

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt this Period

300.00

Occupation

physician

Aggregate Year-to-Date-\$

350.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Don Thompson
Box 166

Henderson, KY 42420

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

1000.00

Occupation

homenmaker

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Thomas J. Belville
2905 Ranch Road

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self Employed

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

500.00

Occupation

Owner/Mining Co.

Aggregate Year-to-Date-\$

600.00

D. Full Name, Mailing Address and ZIP Code

Dr. J. Wesley Johnson
2222 Winchester

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

Occupation

Physician

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Suzanne Warner
1265 Bassett Ave.

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

450.00

Occupation

Attorney

Aggregate Year-to-Date-\$

450.00

F. Full Name, Mailing Address and ZIP Code

Mr. Roger Bright
1303 Clear Springs Trace

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Bright Construction Co., Inc.

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

500.00

Occupation

Homebuilder

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Dr. Eugene E. LaCroix
17011 N. 54th Street

Scottsdale, AZ 85255

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

Doctor

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

4750.00

TOTAL This Period (last page this line number only)

84020240994

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ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-------------------------------------|-----------------------------------|------------------------------------|
| Mrs. Grady Carmack Route 4 Benton, KY 42025 | self | 10-02-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Kenneth A. Matthews 105 Winston Road Mount Laurel, NJ 08054 | First Wayne Corporation | 10-12-84 | 750.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Vice President | Aggregate Year-to-Date-\$ 750.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. George Hunt Collins 4 Overbrook Road Louisville, KY 40207 | Self | 10-15-84 | 400.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President/Owner | Aggregate Year-to-Date-\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Clay L. Morton 398 Mockingbird Valley Rd Louisville, KY 40207 | Wyatt, Tarrant and Combs | 10-17-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Elmer Willis Cunnagin, Jr. 4th and Main Streets London, KY 40741 | Laurel County | 10-15-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation County Attorney | Aggregate Year-to-Date-\$ 280.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Harold W. Newton P. O. Box 355 Hawesville, KY 42348 | self | 10-09-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney at law | Aggregate Year-to-Date-\$ 230.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Kim Elza Route 11, Box 379 London, KY 40741 | Information Requested | 10-08-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 1000.00 | |
| SUSTOTAL of Receipts This Page (optional) | | | 3800.00 |
| TOTAL This Period (last page this line number only) | | | |

5
9
9
9
2
4
0
2
0
2
0
4
0
8

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Ira B. Potter
Box 190

Lackey, KY 41643

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt this Period

1000.00

Occupation

M.D.

Aggregate Year-to-Date-\$ 1000.00

B. Full Name, Mailing Address and ZIP Code

Dr. K. Thomas Reichard
2425 Cherokee Pkwy.

Louisville, KY 40204

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

500.00

Occupation

physician

Aggregate Year-to-Date-\$ 500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Jack O. Guy
Six Piedmont CTR. Suite 712

Atlanta, GA 30305

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Johnson Lane Spad Smith & Co.

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

vice president

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Mark Searce
P. O. Box 489

Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

25.00

Occupation

merchant

Aggregate Year-to-Date-\$ 225.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Lillian A. Hart
Route 2

Falmouth, KY 41040

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

USDA-ASES

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

50.00

Occupation

St. Director

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. R. C. Soaper
P.O. Box 215

Henderson, KY 42420

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Soaper Chemical

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

300.00

Occupation

Owner

Aggregate Year-to-Date-\$ 550.00

G. Full Name, Mailing Address and ZIP Code

Dr. J. Kenneth Allen
6116 Fox Valley Drive

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

300.00

Occupation

Physician

Aggregate Year-to-Date-\$ 300.00

SUBTOTAL of Receipts This Page (optional)

2425.00

TOTAL This Period (last page this line number only)

64020240996

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each
 category of the Detailed
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles T. K. Ho
909 East Broadway

Louisville, KY 40204

Name of Employer

Performance Motors

Date (month,
day, year)

10-16-84

Amount of Each
Receipt this Period

1000.00

Occupation

businessman

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Robert M. Timmerman
2009 Camargo Road

Louisville, KY 40207

Name of Employer

self employed

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

300.00

Occupation

Management Consultant

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

550.00

C. Full Name, Mailing Address and ZIP Code

Mr. George W. Benoit
175 Violet Drive

Pearl River, NY 10965

Name of Employer

Information Requested

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Louise F. Johnson
Catawba Farm
1891 Muir Station Pike
Lexington, KY 40511

Name of Employer

self

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

250.00

Occupation

horsebreeder

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Ms. Charmaine A. Webster
254B Murray Drive

King Of Prussia, PA 19406

Name of Employer

First Wayne Corporation

Date (month,
day, year)

10-12-84

Amount of Each
Receipt This Period

750.00

Occupation

Treasurer

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

750.00

F. Full Name, Mailing Address and ZIP Code

Mr. Paul D. Broughton
11706 E. Arbor Drive

Anchorage, KY 40223

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Gene LaCroix
1700 Park Shore Road

La Grange, KY 40031

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

1000.00

Occupation

Arabian Horse Breeder & Trainer

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Aggregate Year-to-Date-\$

2000.00

SUSTOTAL of Receipts This Page (optional)

4800.00

TOTAL This Period (last page this line number only)

84020240997

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Grady Carmack
Route 4

Benton, KY 42025

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

General Tire

Date (month,
day, year)

10-02-84

Amount of Each
Receipt this Period

1000.00

Occupation

electrician

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Ms. Carolena Mayer
Route 4, James Lane

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-04-84

Amount of Each
Receipt This Period

500.00

Occupation

horseowner

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gorman Collins
59 South First Avenue

Prestonburg, KY 41653

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

WDAC, Inc.

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

200.00

Occupation

self employed

Aggregate Year-to-Date-\$

230.00

D. Full Name, Mailing Address and ZIP Code

Dr. Antoine S. Munther
Dowell Road

Russell Springs, KY 42642

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

250.00

Occupation

Surgeon

Aggregate Year-to-Date-\$

500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

25.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$

405.00

F. Full Name, Mailing Address and ZIP Code

Mr. William M. Noland
Route 2

Harrodsburg, KY 40330

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-01-84

Amount of Each
Receipt This Period

50.00

Occupation

retired

Aggregate Year-to-Date-\$

650.00

G. Full Name, Mailing Address and ZIP Code

Mr. William Emrick
1557 Winchester Road

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2275.00

TOTAL This Period (last page this line number only)

84020240998

SCHEDULE A

ITEMIZED RECEIPTS

Page 17 of 28 for
LINE NUMBER II (a)
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Lee F. Powell
3649 Forest Circle

Paducah, KY 42001

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Old Hickory Clay Co.

Occupation

mining Ceramic Clays

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt: this Period

100.00

B. Full Name, Mailing Address and ZIP Code

Mr. Doug Garner
2915 HI 53

La Grange, KY 40031

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

50.00

C. Full Name, Mailing Address and ZIP Code

Mr. Walter S. Reichert
4909 E. Manslick Road

Louisville, KY 40219

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

E. I. DuPont

Occupation

Lab Tech

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-04-84

Amount of Each
Receipt This Period

25.00

D. Full Name, Mailing Address and ZIP Code

Mr. Abe Schecter
500 La Fontenay Court

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Richard W. Hartnett
204 Dodge Road

Rowley, MA 01969

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Kidder, Peabody & Co.

Occupation

Investment banker

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Douglas D. Stegner
1644 Cherokee Road

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Meidinger, Inc.

Occupation

Consultant

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Phillip Richard Anderson, Jr.
11100 Ridge Road

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

attorney

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2975.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 18 of 28 for
LINE NUMBER 11 (---)
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Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|-------------------------------------|-----------------------------------|------------------------------------|
| Mrs. Linda Ho c/o Charles T. K. Ho 909 East Broadway Louisville, KY 40204 | self | 10-16-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Kenneth W. Towery 908 Rugby Place Louisville, KY 40222 | Ken Towery Firestone | 10-09-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. John E. Bickel, Jr. 2906 Cheyenne Dr. Owensboro, KY 42301 | self | 10-05-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Willie Ray Jones Rt. #5, Box 231 London, KY 40741 | Self | 10-08-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Coal Producer | Aggregate Year-to-Date-\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Albert Wernik 1301 Dove Drive Jeffersonville, IN 47130 | Information Requested | 10-16-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Madeline LaCroix 1700 Park Shore Road La Grange, KY 40031 | self | 10-08-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 1800.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack Leith Lane, Apt. #715 Louisville, KY 40218 | McConnell Senate Committee | 10-15-84 | 3.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Political Consultant | Aggregate Year-to-Date-\$ 313.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 5003.00 |
| TOTAL This Period (last page this line number only) | | | |

84020241000

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. Jerry Mayes
1010 Sherwood Drive

London, KY 40741

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self

Occupation

Dentist

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-08-84

Amount of Each
Receipt this Period

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Ted Cook

Route #7

Box 262 A

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Self employed

Occupation

Firestone Tires Dist

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Susan G. Musson

306 Hillcrest Avenue

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Willis Day

Box 258-B

Str. Route

Mammoth Cave, KY 42259

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-04-84

Amount of Each
Receipt This Period

50.00

E. Full Name, Mailing Address and ZIP Code

Mr. William M. Noland

Route 2

Harrodsburg, KY 40330

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

100.00

F. Full Name, Mailing Address and ZIP Code

Mr. Victor L. Priebe

1001 South Buckeye Lane

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Action Now, Inc.

Occupation

Executive Director

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Doug Garner

2915 HI 53

La Grange, KY 40031

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

950.00

SUBTOTAL of Receipts This Page (optional)

3850.00

TOTAL This Period (last page this line number only)

84020241001

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Irene S. Hall
820 Rugby Place

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-03-84

Amount of Each
Receipt this Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

Mr. Jeff Schecter
3600 Woodside Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William E. Hellmann
3225 Murray Hill Pike

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Stites, McElwain, & Fowler

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

400.00

Occupation

Attorney

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. J. W. Steinman, III
443 Morgan Street

Ft. Thomas, KY 41071

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Deluxe Engraving Co.

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$

550.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Sara Wood Armour
303 Bluffs Edge Drive

Lake Forest, IL 60045

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-08-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Edwin S. Hopson
3003 Lightheart Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Wyatt, Tarrant & Combs

Date (month,
day, year)

10-10-84

Amount of Each
Receipt This Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$

300.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Sara C. Travis
744 Cottage Grove Ln.

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

450.00

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---|---|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Curtis J. Block 10610 U.S. 42 Prospect, KY 40059 | Name of Employer Rudd Construction Equip. Co | Date (month, day, year) 10-10-84 | Amount of Each Receipt This Period 1000.00 |
| | Occupation Executive | | |
| | Aggregate Year-to-Date—\$ 1000.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code Mr. A. Minis Jr. P. O. Box 23559 Savannah, GA 31403 | Name of Employer Information Requested | Date (month, day, year) 10-17-84 | Amount of Each Receipt This Period 250.00 |
| | Occupation Information Requested | | |
| | Aggregate Year-to-Date—\$ 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code Mrs. Naomi S. Wernik 1301 Dove Drive Jeffersonville, IN 47130 | Name of Employer self | Date (month, day, year) 10-16-84 | Amount of Each Receipt This Period 1000.00 |
| | Occupation homemaker | | |
| | Aggregate Year-to-Date—\$ 1000.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code Dr. Jerry B. Buchanan 5615 Wolf Pen Trace Prospect, KY 40059 | Name of Employer Information Requested | Date (month, day, year) 10-10-84 | Amount of Each Receipt This Period 500.00 |
| | Occupation Physician | | |
| | Aggregate Year-to-Date—\$ 500.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code Mr. Baylor Landrum, Jr. 3729 Fairway Lane Louisville, KY 40207 | Name of Employer Self-NTVL | Date (month, day, year) 10-10-84 | Amount of Each Receipt This Period 250.00 |
| | Occupation Insurance Executive | | |
| | Aggregate Year-to-Date—\$ 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code Dr. James E. Carter 805 N. Main St. Tompkinsville, KY 42167 | Name of Employer self | Date (month, day, year) 10-17-84 | Amount of Each Receipt This Period 300.00 |
| | Occupation M. D. | | |
| | Aggregate Year-to-Date—\$ 400.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Joseph B. McClain P. O. Box 9 Paris, KY 40361 | Name of Employer The Hopewell Co, Inc. | Date (month, day, year) 10-09-84 | Amount of Each Receipt This Period 500.00 |
| | Occupation Independent Ins. Agent | | |
| | Aggregate Year-to-Date—\$ 500.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 3800.00 |
| TOTAL This Period (list page this line number only) | | | |

84020241003

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Richard E. Cooper
501 North Main Street
P.O. Box 183
Somerset, KY 42501

Name of Employer

none

Date (month,
day, year)

10-12-84

Amount of Each
Receipt this Period

150.00

Occupation

retired

Aggregate Year-to-Date-\$

250.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

B. Full Name, Mailing Address and ZIP Code

Dr. John W. Deming
3600 Parliament Drive
Alexandria, LA 71301

Name of Employer

self employed

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date-\$

750.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

Mr. Orville Nunn
P. O. Box 254
Bonnieville, KY 42713

Name of Employer

Orville Nunn and Sons Sanitation

Date (month,
day, year)

10-02-84

Amount of Each
Receipt This Period

500.00

Occupation

owner

Aggregate Year-to-Date-\$

500.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Dr. Ronald Falls
3204 Woodside Road
Louisville, KY 40222

Name of Employer

self

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

250.00

Occupation

Doctor

Aggregate Year-to-Date-\$

250.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Mr. Doug Garner
2915 HI 53
La Grange, KY 40031

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

50.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1050.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Mrs. Miles Haman
Apt. 305
Charleston Apts.
Paducah, KY 42001

Name of Employer

none

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

250.00

Occupation

none

Aggregate Year-to-Date-\$

1450.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Mrs. Janet B. Schmidt
P. O. Box 647
Elizabethtown, KY 42701

Name of Employer

self

Date (month,
day, year)

10-03-84

Amount of Each
Receipt This Period

750.00

Occupation

homemaker

Aggregate Year-to-Date-\$

750.00

Receipt For:

☐ Primary

☒ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

24020241004

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. W. D. Henderson
 2921 Palm Avenue

Manhattan Beach, CA 90266

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Kidder, Peabody & Co.

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt this Period

300.00

Occupation

Investment Banker

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. J. W. Steinman, III
 443 Morgan Street

Ft. Thomas, KY 41071

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Deluxe Engraving Co.

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

50.00

Occupation

attorney

Aggregate Year-to-Date-\$

550.00

C. Full Name, Mailing Address and ZIP Code

Mr. W. James Host
 c/o Host & Associates
 120 Kentucky Ave.
 Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Host Communications, Inc.

Date (month,
 day, year)

10-16-84

Amount of Each
 Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. and Mrs. Kenneth J. Tuggle
 3715 Lime Kiln Lane

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Brown, Todd & Heyburn

Date (month,
 day, year)

10-12-84

Amount of Each
 Receipt This Period

150.00

Occupation

Attorney/homemaker

Aggregate Year-to-Date-\$

650.00

E. Full Name, Mailing Address and ZIP Code

Mr. R. C. Block
 10610 U.S. Highway 42

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-10-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Paul G. Keller
 880 Albany Rd.

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Senator James P. Bunning
 30 Winston Hill Rd.

Ft. Thomas, KY 41075

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt This Period

500.00

Occupation

oil producer

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11(3)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|------------------------------|----------------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Charles Leibson 740 Zorn Avenue, #3J Louisville, KY 40206 | self | 10-09-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 300.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Joanna L. Carter 364 Secretariat Trail Corbin, KY 40701 | self | 10-08-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 450.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Bruce McCrea 1101 Park Shore Road La Grange, KY 40031 | Bruce McCrea Management Co. | 10-08-84 | 350.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation owner | Aggregate Year-to-Date-\$ 350.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Lovrick P. Corn P. O. Box 140 Columbus, GA 31993 | W. C. Bradley Co. | 10-17-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Vice President | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Robert McLean Nash Covered Bridge Road Prospect, KY 40059 | self | 10-05-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 700.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. C. A. Dixon Box 970 Hyden, KY 41776 | none | 10-15-84 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ 430.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Frank A. Pachmayr 2845 Medill Place Los Angeles, CA 90064 | self | 10-17-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1800.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
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Name of Committee (in Full)
McConnell Senate Committee

| | | | |
|--|--|---|---|
| A. Full Name, Mailing Address and ZIP Code Mrs. Margaret L. Fields 7408 Dixie Highway Florence, KY 41042 | Name of Employer Self Occupation Real Estate Broker | Date (month, day, year) 10-15-84 | Amount of Each Receipt this Period 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 210.00 | | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Sherri Garner 2915 HI 53 La Grange, KY 40031 | Name of Employer self Occupation homemaker | Date (month, day, year) 10-16-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 1000.00 | | |
| C. Full Name, Mailing Address and ZIP Code Mrs. Alberta A. Roach 1 St. David's Road St. David's, PA 19087 | Name of Employer self Occupation homemaker | Date (month, day, year) 10-12-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 1000.00 | | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Miles Haman Apt. 305 Charleston Apts. Paducah, KY 42001 | Name of Employer none Occupation none | Date (month, day, year) 10-09-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 1450.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mr. William B. Schmidt 720 Sunrise Lane Elizabethtown, KY 42701 | Name of Employer Coco-Cola-Elizabethtown Occupation Business Executive | Date (month, day, year) 10-03-84 | Amount of Each Receipt This Period 750.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 1750.00 | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Harvey E. Hensley Route 5, Box 81 213 Main Street Manchester, KY 40962 | Name of Employer W & H Coal Co Occupation Coal Operator | Date (month, day, year) 10-08-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 1100.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mr. John W. Sutherland get correct address, KY 40000 | Name of Employer Information Requested Occupation Information Requested | Date (month, day, year) 10-15-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ 300.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 4330.00 |
| TOTAL This Period (last page this line number only) | | | |

84020241007

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Ricky Householder
R. R. 3, Box 331-A

Clay, KY 42404

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-12-84

Amount of Each
Receipt This Period

300.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Dr. George I. Uhde
270 Medical Towers South

Louisville, KY 40202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

Doctor, F.A.C.

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Suz-Anne C. Bollinger
4000 Glenview Avenue

Glenview, KY 40025

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. John H. Yost
13100 Osage Rd. North

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-16-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

750.00

E. Full Name, Mailing Address and ZIP Code

Mr. J. A. Burnett
810 Norlando Avenue

Maitland, FL 32751

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Contemporary Cars, Inc.

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

250.00

Occupation

Auto Dealer

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Lawrence Lewis
104 Bentley Avenue
P. O. Box 180
Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

100.00

Occupation

Grocer

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Dr. Ballard Cassady
P. O. Box 3369

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

200.00

Occupation

surgeon

Aggregate Year-to-Date-\$

300.00

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles T. Melvin
 555 North Court Street

Paintsville, KY 41240

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

I.G.A. Store

Date (month,
 day, year)

10-03-84

Amount of Each
 Receipt this Period

300.00

Occupation
 owner

Aggregate Year-to-Date-\$ 800.00

B. Full Name, Mailing Address and ZIP Code

Mr. Jennings Corum

Manchester, KY 40962

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-08-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. John T. Nelson
 7647 National Turnpike

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-15-84

Amount of Each
 Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 300.00

D. Full Name, Mailing Address and ZIP Code

Dr. Joseph J. Dobner
 727 Reed Drive

Frankfort, KY 40601

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-15-84

Amount of Each
 Receipt This Period

500.00

Occupation

Medical Doctor

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Frank A. Pachmayr
 2845 Medill Place

Los Angeles, CA 90064

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Brenda Adams Fleishman
 4107 Woodstone Way

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-05-84

Amount of Each
 Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Dr. Emanuel Rader
 414 Tennessee Avenue
 P. O. Box 70
 Pineville, KY 40977

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-17-84

Amount of Each
 Receipt This Period

500.00

Occupation

Physician

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

3900.00

TOTAL This Period (last page this line number only)

940202410009

SCHEDULE A

ITEMIZED RECEIPTS

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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Charles W. Goering
14 Leathers Road

Ft. Mitchell, KY 41017

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Erlanger Lumber Company

Date (month,
day, year)

10-08-84

Amount of Each
Receipt this Period

500.00

Occupation

President

Aggregate Year-to-Date-\$

750.00

B. Full Name, Mailing Address and ZIP Code

Mr. Dean William Roach
One St. Davids Road

St. David's, PA 19087

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

First Wayne Corporation

Date (month,
day, year)

10-11-84

Amount of Each
Receipt This Period

1000.00

Occupation

Entrepreneur

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Miles Haman
Apt. 305

Charleston Apts.
Paducah, KY 42001

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-09-84

Amount of Each
Receipt This Period

200.00

Occupation

none

Aggregate Year-to-Date-\$

1450.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Helen L. Scott
P.O. Box 7

Henderson, KY 42420

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-17-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. John M. Hess
P. O. Box 1946

Owensboro, KY 42302

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Edward D. Jones & Co.

Date (month,
day, year)

10-15-84

Amount of Each
Receipt This Period

200.00

Occupation

investment broker

Aggregate Year-to-Date-\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Paul Tafel, Jr.
506 Country Lane

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-05-84

Amount of Each
Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

96830.50

84020241010

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11(b)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|------------------|----------------------------|------------------------------------|
| Boyd Co. Republican Women's Club C/O Alene Ratcliff 2431 Henderson Street Ashland, KY 41101 | | 10-09-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date--\$ | 50.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Republican Party of Floyd Co. C/O Ron Frasure 406 Lake Drive Prestonsburg, KY 41653 | | 10-17-84 | 112.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date--\$ | 112.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Republican Party of Logan Co. C/O Lois Johns Crittenden Circle Russellville, KY 42276 | | 10-04-84 | 60.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date--\$ | 60.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Kenton Co. Rep. Women's Club c/o Luella L. Bronesky, Treas. #8 Superior Drive Ft. Mitchell, KY 41017 | | 10-11-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date--\$ | 50.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date--\$ | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date--\$ | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date--\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | 272.00 |
| TOTAL This Period (last page this line number only) | | | 272.00 |

840202410

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 3 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

CIEPAC of Dow Chemical, U.S.A.
9550 Zionsville Road
P. O. Box 68511
Indianapolis, IN 46268

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-04-84

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code

Citizens for the Republic
1253 -7th Street
Suite 200
Santa Monica, CA 90401

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-15-84

5000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$

7500.00

C. Full Name, Mailing Address and ZIP Code

I Love America Committee
303-6th Street

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-12-84

200.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$

200.00

D. Full Name, Mailing Address and ZIP Code

WMI PAC
3003 Butterfield Road
Oak Brook, IL 60521

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-10-84

2000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$

2000.00

E. Full Name, Mailing Address and ZIP Code

CLARKPAC
C/O Clark Equipment Company
Circle Drive
Buchanan, MI 40324

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-10-84

2500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$

7500.00

F. Full Name, Mailing Address and ZIP Code

Inland Container Corp. (INPAC)
151 North Delaware Street
P. O. Box 925
Indianapolis, IN 46206

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-02-84

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Campaign America
c/o Senator Robert Dole
919 Prince Street
Alexandria, VA 22314

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-17-84

2500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$

10000.00

SUBTOTAL of Receipts This Page (optional)

13200.00

TOTAL This Period (last page this line number only)

84020241012

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 3 for
 LINE NUMBER 11(C)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Tenneco Employees Good Govt. Fund

P. O. Box 2511
 Houston, TX 77001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-17-84

500.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

Campaign America
 c/o Senator Robert Dole
 919 Prince Street
 Alexandria, VA 22314

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-17-84

2500.00

Occupation

Aggregate Year-to-Date-\$ 10000.00

C. Full Name, Mailing Address and ZIP Code

Fund For a Conservative Majority
 Mr. Robert C. Heckman, Chairman
 302 Fifth Street, NE.
 Washington, DC 20002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-17-84

13.50

Occupation

In-Kind
 Miscellaneous

Aggregate Year-to-Date-\$ 1526.96

D. Full Name, Mailing Address and ZIP Code

Fund For a Conservative Majority
 Mr. Robert C. Heckman, Chairman
 302 Fifth Street, NE.
 Washington, DC 20002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-17-84

13.46

Occupation

In-Kind
 Miscellaneous

Aggregate Year-to-Date-\$ 1526.96

E. Full Name, Mailing Address and ZIP Code

H. J. Ruff PAC
 C/O Neal Blair
 P. O. Box 881
 Centreville, VA 22020

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-15-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Brown-Forman Pol. Action Comm.
 850 Dixie Highway
 Louisville, KY 40210

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-03-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

G. Full Name, Mailing Address and ZIP Code

FLO-PAC
 P. O. Box 1338

Thomasville, GA 31792

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

10-10-84

5000.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

SUBTOTAL of Receipts This Page (optional)

11026.96

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 3 for
LINE NUMBER 21 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

NAPAC
P. O. Box 1967

Ardmore, OK 73401

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-10-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Public Service PAC
Mr. Roman K. Rice III, Treasurer
8330 Old Courthouse Road, Ste 600
Vienna, VA 22130

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-11-84

5000.00

Occupation

Aggregate Year-to-Date-\$ 10000.00

C. Full Name, Mailing Address and ZIP Code

Assoc of Amer. Phys & Surg. PAC
Mr. Charles Ord
5201-B Lyngate Court
Burke, VA 22015

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-04-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 9360.00

D. Full Name, Mailing Address and ZIP Code

Wilson Foods Corporation
Ms. Mary M. Phillips, Chairman
Oklahoma City, OK 73105

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-16-84

200.00

Occupation

Aggregate Year-to-Date-\$ 200.00

E. Full Name, Mailing Address and ZIP Code

RAYPAC
Raymond International PAC
P. O. Box 22718
Houston, TX 77027

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-04-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Assoc. Equipment Dist. PAC
1101-15th St., NW., Suite 1010
Washington, DC 20005

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-16-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

9200.00

TOTAL This Period (last page this line number only)

33426.96

84020241014

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Liberty National Bank
DO NOT MAIL

Louisville, KY 40201

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-05-84

670.32

Occupation

Aggregate Year-to-Date—\$ 11874.67

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Aggregate Year-to-Date—\$

Receipt For: ☐ Primary ☐ General

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

670.32

TOTAL This Period (last page this line number only)

670.32

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 10 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Victoria Williams 6703 Ashmeade Drive Louisville, Kentucky 40291 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-15-84 | 2.90 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Susan Ballard 3629 Fountain Drive, Apt. #3 Louisville, KY. 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 108.53 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Terry Carmack 3201 Leith Lane #715 Louisville, KY 40218 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 52.10 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Delta Temporary, Inc. 224B Executive Park Louisville, KY 40207 | Temporary Help Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 212.75 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Peggy Fucella 1313 Tanglewood Trail Louisville, KY 40223 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 284.48 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| K. S. Air, Inc. 4510 Mt. Vernon Rd. Louisville, Ky. 40220 | Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 2968.50 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group, Inc P. O. Box 50190 Indianapolis, IN 46250 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 44,949.33 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Paul Reid 107 Finley #P-5 Louisville, KY 40220 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 82.08 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| AT&T Information Systems 9300 Shelbyville Road Louisville, Kentucky 40222 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 416.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 49,076.67 |
| TOTAL This Period (last page this line number only) | | | |

84020241016

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 10
 LINE NUMBER 17
 (Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Victoria Williams 6703 Ashmeade Drive Louisville, Kentucky 40291 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/10/84 | 25.83 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Biomedical Comm. Center Health Sciences Center U of L Louisville, KY 40292 | Dubbing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 71.50 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Terry Carmack 3201 Leith Lane #715 Louisville, KY 40218 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 127.10 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 140.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| K.S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY. 40220 | Airplane rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 2,000.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/10/84 | 10,387.12 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 148.05 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 500.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Terry Carmack 3201 Leith Lane #715 Louisville, KY 40218 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 103.20 |

SUBTOTAL of Disbursements This Page (optional) 13,502.80

TOTAL This Period (last page this line number only)

84020241017

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 3 of 10 for
LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/3/84 | 9.45 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 556.15 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Kentucky Press Service, Inc. 332 Capitol Avenue Frankfort, Kentucky 40601 | Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 140.63 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group P. O. Box 50190 Indianapolis, IN 46250 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 67,091.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P. O. Box 32440 Louisville, Ky 40232 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 1,443.39 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Todd Smith 2825 Lexington Rd. Box 3361 Louisville, KY 40220 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 117.25 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 1,097.25 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Terry Wallingford 3974 Yearling Ct. Cincinnati, OH 45211 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 120.60 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Terry Carmack 3201 Leith Lane #715 Louisville, KY. 40218 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/16/84 | 160.13 |
| SUBTOTAL of Disbursements This Page (optional) | | | 70,735.85 |
| TOTAL This Period (last page this line number only) | | | |

84020241018

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 10 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
|--|---|------------------------------------|--|
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/3/84 | Amount of Each Disbursement This Period 73.13 |
| B. Full Name, Mailing Address and ZIP Code Sharon Pierce 5609 Oxford, Apt. #847 Louisville, KY 40291 | Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/5/84 | Amount of Each Disbursement This Period 187.15 |
| C. Full Name, Mailing Address and ZIP Code Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/8/84 | Amount of Each Disbursement This Period 16,181.50 |
| D. Full Name, Mailing Address and ZIP Code Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/8/84 | Amount of Each Disbursement This Period 107.20 |
| E. Full Name, Mailing Address and ZIP Code Copy Corp. 10420 Bluegrass Pkwy Louisville, Kentucky 40299 | Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/4/84 | Amount of Each Disbursement This Period 90.72 |
| F. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/4/84 | Amount of Each Disbursement This Period 155.93 |
| G. Full Name, Mailing Address and ZIP Code Ms. Victoria Hensley 11 Mason Court Villa Hill, Kentucky 41016 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/8/84 | Amount of Each Disbursement This Period 80.40 |
| H. Full Name, Mailing Address and ZIP Code Sharon Pierce 5609 Oxford, Apt. #847 Louisville, KY 40291 | Purpose of Disbursement Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/5/84 | Amount of Each Disbursement This Period 286.45 |
| I. Full Name, Mailing Address and ZIP Code Sprint Accounts Receivable Dept. Pittsburg, PA 15254 | Purpose of Disbursement Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/4/84 | Amount of Each Disbursement This Period 25.19 |
| SUBTOTAL of Disbursements This Page (optional) | | | 17,187.67 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 5 of 10 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any information copied from such Reports and Station may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---|--------------------------------|--|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205 | Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 43.84 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc 456 West 43rd Street New York, New York 10036 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 5,590.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Copy Corp 10420 Bluegrass Pkwy Louisville, KY 40299 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 62.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane Louisville, Ky. 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/9/84 | 166.43 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Susan Hill 2825 Lexington Road Louisville, KY 40280 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 104.69 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 97.69 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Sharon Pierce 5609 Oxford, Apt. #847 Louisville, Kentucky 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 514.17 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 459.61 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Jack Telle 2215 Talbott Avenue Louisville, KY 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 92.27 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7,130.70 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 6 of 10 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Ailes Communication Inc. 456 West 43rd Street New York, NY 10036 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 4,800.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Copy Shop 1941 Bishop Lane, Suite 106 Louisville, Kentucky 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 381.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/10/84 | 155.66 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 790.42 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Office Products Clearance Center P. O. Box 1679 Louisville, KY 40291 | Office Furniture Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 285.86 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Sharon Pierce 5609 Oxford, Apt. #847 Louisville, Kentucky 40291 | Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/16/84 | 187.64 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mike Shea 4601 Lincoln Road Louisville, Ky 40220 | Travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/2/84 | 346.15 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Don Triplett 3317 Oleanda Louisville, KY 40215 | Contact Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 70.35 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc. 456 W. 43rd Street New York, NY 10036 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 1,000.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 8,017.08 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 10 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| The Copy Shop 1941 Bishop Lane, Suite 106 Louisville, KY 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 123.75 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Federal Express Corp. P. O. Box 727 Dept A Memphis, TN 38194 | Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 12.50 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Janet Mullins 1249 Everett Ave, Louisville, KY. 40204 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 1,061.69 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Bill Oakley Vieux Carre Apts., Apt. #16 Louisville, KY 40222 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/12/84 | 90.74 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Pitney Bowes P. O. Box 38390 Louisville, KY 40223 | Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 59.25 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U. S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/3/83 | 175.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communication, Inc. 456 W. 43rd Street New York, NY 10036 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/17/84 | 4,800.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Supplies 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/5/84 | 504.72 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/15/84 | 1,127.70 |
| SUBTOTAL of Disbursements This Page (optional) | | | 7,955.35 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 8 of 10 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Donna Cottrell 49 Place Janue Louisville, KY 40203 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 89.61 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Federal Express Corp. P. O. Box 727, Dept. A Memphis, TN 38194 | Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 22.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Performance Business Forms P. O. Box 100770 Nashville, TN. 37210 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 101.33 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Jack Prewitt P. O. Box 206 Liberty, KY 42539 | Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/11/84 | 280.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Jeff Swedenburg P. O. Box 512 SBTS Louisville, KY. 40280 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 92.96 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Americall, Louisville 10000 Shelbyville Road Louisville, Kentucky 40223 | Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 1,090.10 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| John Conti P. O. Box 18289 Louisville, KY 40218 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/4/84 | 31.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Theresa Cole 2825 Lexington Road Louisville, Ky 40280 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 105.53 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U. S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/2/84 | 500.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 2,312.53 |
| TOTAL This Period (last page this line number only) | | | |

84020241025

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 9 of 10 for
LINE NUMBER 19
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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|--|--|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Federal Express Corp. P. O. Box 727 Dept. A Memphis, TN 38194 | Delivery Charges Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/13/84 | 21.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| K.S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/1/84 | 1,160.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Janice Monroe 2825 Lexington Road Louisville, KY 40280 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 46.90 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Perkins Group, Inc P. O. Box 50190 Indianapolis, IN 46250 | Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/1/84 | 31,750.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Debbie Ratliff 8611 Attu Lane Louisville, KY 40291 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 96.31 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mark Stambaugh 146 Grace Ct. #10 Covington, KY 41017 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/8/84 | 134.10 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U. S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/2/84 | 500.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Fund for a Conservative Majority 302 Fifth Street, NE. Washington, DC 20002 | Majority in Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/17/84 | 13.50 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Fund for a Conservative Majority 302 Fifth Street NE. Washington, DC 20002 | In Kind Miscellaneous Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/17/84 | 13.46 |
| SUBTOTAL of Disbursements This Page (optional) | | | 33,735.17 |
| TOTAL This Period (last page this line number only) | | | |

84020241024

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 10 of 10 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
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| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Neil Huffman 7501 Hunting Creek Drive Louisville, Kentucky 40059 | Purpose of Disbursement In-Kind Campaign Car Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/17/84 | Amount of Each Disbursement This Period 50.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, Kentucky 40243 | Purpose of Disbursement In Kind Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/17/84 | Amount of Each Disbursement This Period 112.50 |
| C. Full Name, Mailing Address and ZIP Code Liberty National Bank Louisville, KY. 40218 | Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10/2/84 | Amount of Each Disbursement This Period 4,009.43 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 4,171.93 |
| TOTAL This Period (last page this line number only) | | | 213,825.75 |

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**NOT
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ATTACH SHEET
COLLECTOR
☐
FBI/DOJ

STANDARD NORTH COMPANY, U.S.A. 275210
FOR COPY



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT (S) WAS:

- ☐ HAND DELIVERED _____
Date of Receipt _____
- ☐ INSIDE MAIL _____
Date of Receipt _____
- ☐ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS _____
Date of Receipt _____
- ☐ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date Of Receipt _____
- ☐ FIRST CLASS MAIL POSTMARKED _____
- ☐ REGISTERED/CERTIFIED MAIL POSTMARK _____
- ☐ NO POSTMARK
- ☐ POSTMARK ILLEGIBLE
- ☒ OTHER _____ POSTMARK Oct. 24, 1984
- AND OR DATE OF RECEIPT _____

84020241027



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20543

JAN 4 1985

RG-5

**Larry J. Steinberg, Treasurer
McCannell Senate Committee
P.O. Box 1498
Louisville, KY 40201**

Identification Number: C00195051

Reference: 12 Day Pre-General Report (10/1/84-10/17/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-For future reports, please be advised that when itemizing contributions from political committees, you should include the full name of the connected organization or a readily recognizable acronym thereof.

Any amendment or clarification should be filed with the Secretary of the Senate, 222 Hart Senate Office Building, Washington, DC 20510. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4040.

Sincerely,

**Robin Kelly
Reports Analyst
Reports Analysis Division**

05033701726

RECEIVED
LOUCK ROSS & Co.
SECRETARY OF THE SENATE

1985 JAN 17 PM 1:16 January 17, 1985

HAND DELIVERED ☐

Secretary of the Senate
232 Hart Senate Office Bldg.
Washington, D.C. 20510

Re: McConnell Senate Committee FEC Identification No. C00154051
30 Day Post General Report (10/18/84 through 11/16/84)

Gentlemen:

The attached letter was received from the Federal Election Commission, indicating that we needed to file amendment to the above mentioned report to indicate whether the loan from the candidate was in fact from personal funds. While I believe that the information contained on Schedule C included in the filing clearly indicates that the monies are from the candidate's personal funds (in accordance with the instructions on the back of that Schedule), I am writing to reaffirm that the loan was in fact derived from the candidate's personal funds, as defined by Federal Election Commission Regulations.

I trust that this information will suffice for your purposes.

Very truly yours,

Larry J. Steinberg

Larry J. Steinberg
Treasurer/McConnell Senate Committee

LJS:pmf

Enclosure



FEDERAL ELECTION COMMISSION
WASHINGTON, DC 20463

JAN 2 1985

RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: 30 Day Post-General Report (10/18/84-11/26/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly
Reports Analyst
Reports Analysis Division

The Ross & Co.

518 West Broadway
Louisville, Kentucky 40202



Secretary of the Senate
232 Hart Senate Office Bldg.
Washington, D.C. 20510



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ALICIA RAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT (S) WAS:

_____ HAND DELIVERED _____

_____ Date of Receipt _____

_____ INSIDE MAIL _____

_____ Date of Receipt _____

_____ RECEIVED FROM THE HOUSE OFFICE OF
RECORDS AND REGISTRATIONS _____

_____ Date of Receipt _____

_____ RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____

_____ Date of Receipt _____

_____ FIRST CLASS MAIL POSTMARKED _____

_____ REGISTERED/CERTIFIED MAIL POSTMARK _____

_____ NO POSTMARK _____

_____ POSTMARK ILLEGIBLE _____

✓ _____ OTHER _____

POSTMARK

Jan 15, 1985

_____ AND OR DATE OF RECEIPT _____

85920011093

REPORTS OF RECEIPTS AND DISBURSEMENTS
For Authorized Committee

(Summary Page)

ALIGN AREA

1. Name of Committee (in Full)
McConnell Senate Committee

2. FEC Identification Number
000155051

ALIGN AREA

THE SENATE

Address (Number and Street)

P. O. Box 1496

3. Is this Report an Amendment?

☐ YES

☒ NO

City, State and Zip Code

Louisville, Kentucky 40201

☐ Check if address is different than previously reported.

HAND DELIVERED ☐

4.

TYPE OF REPORT

☐ April 15 Quarterly Report

☐ Twelfth day report preceding _____
(Type of Election)

☐ July 15 Quarterly Report

election on _____ in the State of _____

☐ October 15 Quarterly Report

☒ Thirtieth day report following the General Election on

☐ January 31 Year End Report

November 6, 1984 in the State of **Kentucky**

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

This report contains activity for — ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period **10/18/84** through **11/26/84**

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions (other than loans) (From Line 11 (e))

273,395

1,098,264

(b) Total Contribution Refunds (from Line 20 (d))

3,690

5,014

(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))

269,705

1,093,250

7. Net Operating Expenditures

(a) Total Operating Expenditures (from Line 17)

312,553

1,477,997

(b) Total Offsets to Operating Expenditures (from Line 14)

6,000

6,579

(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))

306,553

1,471,418

8. Cash on Hand at Close of Reporting Period (from Line 27)

24,770

9. Debts and Obligations Owed TO The Committee
(Itemize all on Schedule C or Schedule D)

10. Debts and Obligations Owed BY The Committee
(Itemize all on Schedule C or Schedule D)

40,084

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-323-4068

Larry J. Steinberg

Type or Print Name of Treasurer

SIGNATURE OF TREASURER

December 6, 1984
Date

NOTE: Submission of false erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §4373.

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

Total Receipts Since Inception - \$1,790,436

**DETAILED SUMMARY PAGE
of Receipts and Disbursements
(Page 2, FEC FORM 3)**

| Name of Committee (in Full): McConnell Senate Committee | | Report Covering the Period: From: Oct. 18, 1984 To: Nov. 26, 1984 | |
|--|---------|--|-----------------------------------|
| | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| I. RECEIPTS | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: | | | |
| (a) Individuals/Persons Other Than Political Committees (Memo Entry Unitemized \$ 63,546) | 242,138 | 932,965 | 11 (a) |
| (b) Political Party Committees | 1,646 | 8,814 | 11 (b) |
| (c) Other Political Committees | 29,611 | 156,484 | 11 (c) |
| (d) The Candidate | | | 11 (d) |
| (e) TOTAL CONTRIBUTIONS (other than loans (add 11(a), 11(b), 11(c) and 11(d)). | 273,395 | 1,098,264 | 11 (e) |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | | 12 |
| 13. LOANS: | | | |
| (a) Made or Guaranteed by the Candidate | 15,000 | 40,000 | 13 (a) |
| (b) All Other Loans | | | 13 (b) |
| (c) TOTAL LOANS (add 13 (a) and 13 (b)). | 15,000 | 40,000 | 13 (c) |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 6,000 | 6,579 | 14 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 13,983 | 26,360 | 15 |
| 16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15) | 308,378 | 1,171,203 | 16 |
| II. DISBURSEMENTS | | | |
| 17. OPERATING EXPENDITURES | 312,553 | 1,477,997 | 17 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | | 18 |
| 19. LOAN REPAYMENTS: | | | |
| (a) Of Loans Made or Guaranteed by the Candidate | 15,000 | 40,000 | 19 (a) |
| (b) Of All Other Loans | | | 19 (b) |
| (c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b)). | 15,000 | 40,000 | 19 (c) |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | | |
| (a) Individuals/Persons Other Than Political Committees | 3,690 | 4,014 | 20 (a) |
| (b) Political Party Committees | | | 20 (b) |
| (c) Other Political Committees | | 1,000 | 20 (c) |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c)) | 3,690 | 5,014 | 20 (d) |
| 21. OTHER DISBURSEMENTS | 13,815 | 13,815 | 21 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21) | 345,058 | 1,536,826 | 22 |
| III. CASH SUMMARY | | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | 61,450 | 23 |
| 24. TOTAL RECEIPTS THIS PERIOD (From Line 16) | \$ | 308,378 | 24 |
| 25. SUBTOTAL (Add Line 23 and Line 24) | \$ | 369,828 | 25 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22) | \$ | 345,058 | 26 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25) | \$ | 24,770 | 27 |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 3 for
LINE NUMBER 10
(Use separate Schedules
for each numbered line)

| Name of Committee (In Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications 456 West 43rd Street New York, NY 10036 | | 58,388 | 33,388 | 25,000 |
| Nature of Debt (Purpose): Communications training | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor ABC Printing Company 3520 College Drive Jeffersontown, KY 40299 | 634 | | 634 | |
| Nature of Debt (Purpose): Printing | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Judge Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | 908 | | | 908 |
| Nature of Debt (Purpose): Airplane Tickets | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor South Central Bell P. O. Box 32440 Louisville, KY 40232 | 2,532 | 3,911 | 3,878 | 2,565 |
| Nature of Debt (Purpose): Telephone service | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | 4,049 | 432 | 4,481 | |
| Nature of Debt (Purpose): Office rent | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Datapoint Corporation P. O. Box 93192 Chicago, IL 60673 | 7,197 | 192 | 7,389 | |
| Nature of Debt (Purpose): Computer equipment | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 28, 473 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2 and 3 and carry forward to line of Summary Page (last page only) | | | | |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor K.S. Air, Inc. P. O. Box 7183 Louisville, Kentucky 40207 | | 4,706 | 3,873 | 833 |
| Nature of Debt (Purpose): Airplane Tickets | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 1901 Embassy Square Louisville, KY 40299 | 60 | 210 | 270 | |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233 | 348 | 696 | 348 | 696 |
| Nature of Debt (Purpose): Office equipment rental | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Americall Louisville 10000 Shelbyville Road Louisville, KY 40223 | 746 | 1,069 | 1,815 | |
| Nature of Debt (Purpose): Long Distance Calls | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Commercial Office Suppliers, Inc. 433 East Market Street Louisville, KY 40202 | 548 | 178 | 726 | |
| Nature of Debt (Purpose): Office Supplies | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116 | | 2,298 | 201 | 2,097 |
| Nature of Debt (Purpose): Travel reimbursement | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 3,626 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to Schedule D, Page 3 (last page only) | | | | |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 3 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (In Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Columbia Press, Inc. P. O. Box 346 Columbus, IN 47202 | | 3,957 | 110 | 3,847 |
| Nature of Debt (Purpose): Printing | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | | 199,044 | 194,906 | 4,138 |
| Nature of Debt (Purpose): Media | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 7,985 |
| 2) TOTAL This Period (last page this line only) | | | | 40,084 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2 and 3 and carry forward to appropriate line of Summary Page (last page only) | | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 28 for
 LINE NUMBER 11-11
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--|-------------------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mrs. Ruth Dewey Route 1, Sledd Creek Gilbertsville, KY 42044 | | none | 11-05-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation homemaker | Amount of Each Receipt This Period 50.00 |
| | | Aggregate Year-to-Date-\$ | 530.00 |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Willie D. Greer 115 Sycamore St. London, KY 40741 | | none | 11-05-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Retired | Amount of Each Receipt This Period 100.00 |
| | | Aggregate Year-to-Date-\$ | 260.00 |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mrs. Elaine D. Korn 10 Swan Lake Drive Sumter, SC 29150 | | self | 10-22-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation homemaker | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Harold K. Phillips 511 S. San Fernando Road Burbank, CA 91502 | | Pepperdine University | 10-22-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation professor | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. John G. Arnett, Jr. 7436 Burlington Pike Florence, KY 41042 | | self | 10-30-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation attorney | Amount of Each Receipt This Period 100.00 |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. H. Lyle Duerson, Jr. 400 Pleasantview Avenue Louisville, KY 40206 | | Southern Optical | 10-25-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President/Optician | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 750.00 |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Henry E Haller, Jr. 5023 Frew Ave Pittsburgh, PA 15213 | | Information Requested | 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2000.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 72
 LINE NUMBER 1113
 (Use separate sheets for each category of the detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Charles Leibson
740 Zorn Avenue, #3J

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

300.00

Occupation

homemaker

Aggregate Year-to-Date-\$

600.00

B. Full Name, Mailing Address and ZIP Code

Mr. William J. Receveur, Jr.
1324 Navajo Ct

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Garst-Receveur

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

President

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Charles R. VanHoose
200 Steel Drive

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

11-07-84

Amount of Each
Receipt This Period

30.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

230.00

D. Full Name, Mailing Address and ZIP Code

Dr. William H. Baker
2319 Clarkswood Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

1000.00

Occupation

Doctor

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Richard C. Elliott
23 Harbor Island

Newport Beach, CA 92660

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

R.C. Elliott Corporation

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Michael W. Hart
P.O. Box 268

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Willard W. Lindsey
110 Pike Avenue

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

50.00

Occupation

Oil Gas Developer and Operator

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2630.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 28 for
 LINE NUMBER 11-19-84
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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|--|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Ms. Mattie Lou Riley 417 West 12th Street Benton, KY 42025 | Name of Employer none | Date (month, day, year) 11-19-84 | Amount of Each Receipt This Period 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date—\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. John L. Warden 125 Broad Street New York, NY 10004 | Name of Employer Information Requested | Date (month, day, year) 11-07-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Carlton Beal 104 S. Pecos Midland, TX 79701 | Name of Employer self | Date (month, day, year) 11-02-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Petroleum engineer | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Arthur Farwell Box 11360 Tryon, NC 28782 | Name of Employer | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Marguerite G. Lyons 618 - 15th Street Ashland, KY 41101 | Name of Employer self employed | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Dr. James F. Williamson Ashland, KY 41101 | Name of Employer self employed | Date (month, day, year) 10-19-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Medical Dr. | Aggregate Year-to-Date—\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Robert Bova 957 Turkeyfoot Road Lexington, KY 40502 | Name of Employer Information Requested | Date (month, day, year) 11-08-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3300.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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|---|-------------------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Richard Fleischaker 2460 Liberty Tower P. O. Box 1178 Oklahoma City, OK 73101 | Jolen Products | 10-31-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman of the Board | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Paul D Hinch 2431 E 61st., Suite 800 Tulsa, OK 74136 | Self-employed | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Real estate developer | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Alice Sayre 1559 Colonial Terrace Arlington, VA 22209 | | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Jerry Zelman 960 Arthur Godfrey Road, Ste 401 Miami, FL 33140 | self | 10-31-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation doctor | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Paul Burnam W. Main Street Richmond, KY 40475 | self | 11-19-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | | |
| | Aggregate Year-to-Date-\$ | 300.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Otto M Fox, Jr. 301 N 21st St Montibello, CA 90640 | First Interstate Mortgage | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation VP | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Ernest Meade 1001 Winchester Ave. Ashland, KY 41101 | Hertz System Leasing-Self | 11-05-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Auto Rental | | |
| | Aggregate Year-to-Date-\$ | 230.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1350.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1123
(Use separate schedules for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
McConnell Senate Committee

| | | |
|---|--|--|
| A. Full Name, Mailing Address and ZIP Code Mrs. Theresa Shaw 9017 Cardiff Rd. Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Jefferson Cnty. Government 10-23-84 Occupation Land Aquis. Agent Aggregate Year-to-Date-\$ 260.00 | Date (month, day, year) 10-23-84 Amount of Each Receipt This Period 50.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Howard E. Chappell P. O. Box 746 Hazard, KY 41701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Hazard Express, Inc. 10-26-84 Occupation Owner/Trucking Company Aggregate Year-to-Date-\$ 1200.00 | Date (month, day, year) 10-26-84 Amount of Each Receipt This Period 100.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Ottis H. Fultz Carter, KY 41128 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Information Requested 11-05-84 Occupation Information Requested Aggregate Year-to-Date-\$ 325.00 | Date (month, day, year) 11-05-84 Amount of Each Receipt This Period 100.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. John H. Hutchinson 8135 Lake Avenue Louisville, KY 40222 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Jefferson County Government 10-24-84 Occupation Information Requested Aggregate Year-to-Date-\$ 275.00 | Date (month, day, year) 10-24-84 Amount of Each Receipt This Period 100.00 |
| E. Full Name, Mailing Address and ZIP Code Mrs. Elisha Mitchell Route 5 Box 312 Corbin, KY 40701 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Information Requested 10-19-84 Occupation Information Requested Aggregate Year-to-Date-\$ 500.00 | Date (month, day, year) 10-19-84 Amount of Each Receipt This Period 500.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Charles H. Simpson 2775 Fairway Drive Baton Rouge, LA 70809 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer C.S. Industries 10-19-84 Occupation President Aggregate Year-to-Date-\$ 250.00 | Date (month, day, year) 10-19-84 Amount of Each Receipt This Period 250.00 |
| G. Full Name, Mailing Address and ZIP Code Mrs. J. N. Clevenger 6536 High Drive Shawnee Mission, KS 66208 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer self 11-07-84 Occupation homemaker Aggregate Year-to-Date-\$ 2000.00 | Date (month, day, year) 11-07-84 Amount of Each Receipt This Period 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | 2100.00 |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule(s) for each
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Summary Page)

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|---|--|--|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Alexander Gaston Meadgate 101 Lewis St. Greenwich, CT 06830 | Name of Employer Self-Employed | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Investor | Aggregate Year-to-Date—\$ 750.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. R. D. Jennings 9243 Interline Avenue Baton Rouge, LA 70809 | Name of Employer Capital Valve & Fitting Co. | Date (month, day, year) 10-22-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation president | Aggregate Year-to-Date—\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Arthur Musarra 1718 Statler Hilton Buffalo, NY 14202 | Name of Employer Musarra & Musarra | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Mildred Stanhagen 1261 East Edgemont Phoenix, AZ 85006 | Name of Employer none | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ 550.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Robert W. Corcoran Box 186 Danville, KY 40422 | Name of Employer Ag. Sales & Service | Date (month, day, year) 11-19-84 | Amount of Each Receipt This Period 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation partner | Aggregate Year-to-Date—\$ 300.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. James L. Gibson 1838 Yale Drive Louisville, KY 40205 | Name of Employer self | Date (month, day, year) 10-23-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Albert S. Kellow 1603 Avenue Plaza Louisville, KY 40203 | Name of Employer none | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ 550.00 | |
| SUBTOTAL of Receipts This Page (optional): | | | 2900.00 |
| TOTAL This Period (last page this line number only): | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 7 of 72 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ms. Mary J Norgaard
 135 Arrowhead Lane

Haines City, FL 33844

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt this Period

250.00

Occupation

Housewife

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. John R Stocks
 4909 N Monroe St.

Tallahassee, FL 32303

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Coastal Co.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Executive

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. A. Myers Davis
 395 Redding Rd. #68

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

750.00

Occupation

A. Myers Davis Dev. Co., Inc.

Aggregate Year-to-Date-\$

1500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Harry W Gorst
 6301 Quebec Dr.

Los Angeles, CA 90062

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. John B Kilroy, Jr.
 2230 E Imperial Hwy

El Segundo, CA 90245

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Real Estate Developer

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Max H. Pearson
 7400 Midlothian Pike

Richmond, VA 23225

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Richmond Honda

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Ms. Alice Tatum
 515 Fountain Avenue

Georgetown, KY 40324

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1112
(Use separate schedule(s) for each
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Summary Page)

| | | | |
|---|--|---|--|
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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Ann D. Aaron 599 Garden Drive Louisville, KY 40206 | | Name of Employer Information Requested 10-25-84 | Date (month, day, year) 10-25-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested Aggregate Year-to-Date-\$ 250.00 | Amount of Each Receipt this Period 250.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Michael A. Dicken 307 Mackie Lane Louisville, KY 40216 | | Name of Employer self 10-18-84 | Date (month, day, year) 10-18-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation CPA Aggregate Year-to-Date-\$ 1000.00 | Amount of Each Receipt This Period 1000.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Willie D. Greer 115 Sycamore St. London, KY 40741 | | Name of Employer none 11-15-84 | Date (month, day, year) 11-15-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Retired Aggregate Year-to-Date-\$ 260.00 | Amount of Each Receipt This Period 30.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. George Krauser, Jr. 15 Chamberry Circle Louisville, KY 40207 | | Name of Employer Touche-Ross 10-25-84 | Date (month, day, year) 10-25-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Accountant Aggregate Year-to-Date-\$ 1000.00 | Amount of Each Receipt This Period 1000.00 |
| E. Full Name, Mailing Address and ZIP Code Dr. W. V. Pierce 822 North Ft. Thomas Avenue Fort Thomas, KY 41075 | | Name of Employer none 11-15-84 | Date (month, day, year) 11-15-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation retired physician Aggregate Year-to-Date-\$ 270.00 | Amount of Each Receipt This Period 30.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. John G. Arnett, Jr. 7436 Burlington Pike Florence, KY 41042 | | Name of Employer self 11-19-84 | Date (month, day, year) 11-19-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation attorney Aggregate Year-to-Date-\$ 500.00 | Amount of Each Receipt This Period 400.00 |
| G. Full Name, Mailing Address and ZIP Code SGM William J. Durr 062 30 9958 P. O. Box 700 Fort Campbell, KY 42223 | | Name of Employer U.S. Army 11-01-84 | Date (month, day, year) 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation SGM Aggregate Year-to-Date-\$ 225.00 | Amount of Each Receipt This Period 40.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2750.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11-11-11
(Use separate schedule(s) for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Frederic C. Hamilton
1600 Broadway

Denver, CO 80202

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hamilton Bros. Oil

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

450.00

B. Full Name, Mailing Address and ZIP Code

Ms. Annette B. Lenz
1602 Gardiner Ln., #121

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Precision Tool Die Mach. Co., Inc

Date (month,
day, year)

11-02-84

Amount of Each
Receipt This Period

30.00

Occupation

Secretary & Treasurer

Aggregate Year-to-Date-\$

225.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gary Reece
P. O. Box 7

Annville, KY 40402

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Annville Trucking

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Manager

Aggregate Year-to-Date-\$

700.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Edith Mae VanHoose
Box 2319

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

200.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

400.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Trilby Ball
2124 Griffith Ave

Owensboro, KY 42301

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

60.00

Occupation

Homemaker

Aggregate Year-to-Date-\$

410.00

F. Full Name, Mailing Address and ZIP Code

Mr. Charles F. Elmes
4475 North Ocean Blvd., Apt. 306

Delray Beach, FL 33444

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Dr. Daryl Harvey
Route 6, Box 1-C

Glasgow, KY 42141

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

200.00

Occupation

M. D.

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

1490.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. M. R. Linnell
 450 Maya Palm Drive

Boca Raton, FL 33432

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Linnell & Co.

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

500.00

Occupation

Real Estate Developer

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

Mr. Duane R. Roberts
 P. O. Box 2447

Riverside, CA 92516

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

D. R. R. Investments

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

250.00

Occupation

Investments

Aggregate Year-to-Date-\$ 750.00

C. Full Name, Mailing Address and ZIP Code

Mr. Maxwell Belding
 11 Meeting House Lane

Old Lyme, CT 06371

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Equity Venture

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Real Estate

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. F. Evans Farwell
 5824 St. Charles Avenue

New Orleans, LA 70115

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Whitney Nat'l Bank

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

500.00

Occupation

Executive

Aggregate Year-to-Date-\$ 1500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Fred Hervey
 PO Box 20230

Phoenix, AZ 85036

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Sun Publishing Co.

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

Exec.

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. John Ruan
 3200 Ruan Center
 666 Grand Ave
 Des Moines, IA 50309

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Ruan Companies

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Ms. Pauline E. Williman
 447 Loudonville Road

Albany, NY 12211

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

10-31-84

Amount of Each
 Receipt This Period

250.00

Occupation

short hand reporter

Aggregate Year-to-Date-\$ 400.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 11 of 72 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Donald E. Bowles
Box 216

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-16-84

Amount of Each
Receipt this Period

100.00

Occupation

Coal Producer

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Edward Forbes
P. O. Box 3056

Vero Beach, FL 32963

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

American Ship Bldg. Co.

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

500.00

Occupation

Vice President

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Frank S. Hoag, Jr.
825 West 6th Street

Pueblo, CO 81002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Addison M. McConnell, Sr.
12 Sequoyah Dr.

Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

1000.00

Occupation

Retired

Aggregate Year-to-Date-\$

1800.00

E. Full Name, Mailing Address and ZIP Code

Mr. Richard M. Scaife
Box 1138

Pittsburg, PA 15230

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Tribune-Review

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

1000.00

Occupation

Publisher

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Carl J. Zoeller
9011 Whipps Mill Rd.

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Masters Supply

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

1000.00

Occupation

Exec./President

Aggregate Year-to-Date-\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Susan H. Calhoun
1107 Beech Road

Rosemont, PA 19010

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

4600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 12 of 72 for
 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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|---|---|--|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. William H G France PO Box K Daytona Beach, FL 32015 | Name of Employer Int. Speedway | Date (month, day, year) 10-29-84 | Amount of Each Receipt this Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman | Aggregate Year-to-Date-\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Hazel S Howe Pleasant Point Cushing, ME 04563 | Name of Employer self | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Ms. Aurora Meneses 400 E. Colonial Drive Orlando, FL 32803 | Name of Employer self | Date (month, day, year) 11-07-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation self-employed | Aggregate Year-to-Date-\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Theresa Shaw 9017 Cardiff Rd. Louisville, KY 40222 | Name of Employer Jefferson Cnty. Government | Date (month, day, year) 10-31-84 | Amount of Each Receipt This Period 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Land Aquis. Agent | Aggregate Year-to-Date-\$ 260.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Charles L. Cherry 521 8th Avenue, NW Fayette, AL 35555 | Name of Employer Charles L. Cherry & Assoc. | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Ying Saing Hwa 5437 Arrowhead Avenue Buena Park, CA 90621 | Name of Employer Information Requested | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mrs. Nancy Mitchell 217 Hamlin Street Corbin, KY 40701 | Name of Employer Information Requested | Date (month, day, year) 10-19-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2050.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedules for each
 category of the Detailed
 Summary Page)

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|---|-----------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. Harold S. Smith P. O. Box 1941 Naples, FL 33939 | Information Requested | 11-01-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Information Requested | |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. J. N. Clevenger 6536 High Drive Shawnee Mission, KS 66208 | self | 11-07-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ | 2000.00 |
| | homemaker | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Alexander Gaston Headgate 101 Lewis St. Greenwich, CT 06830 | Self-Employed | 11-01-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ | 750.00 |
| | Investor | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. J. A. Johnson 128 De Mott Avenue Rockville Centre, NY 11570 | Steamco Corp. | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ | 250.00 |
| | President | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Frank L. Stanonis, II 142 N. Arlington Drive Henderson, KY 42420 | The Wiser Oil Co. | 11-21-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ | 250.00 |
| | Geologist | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Joseph C. Corradino 1505 Sylvan Court Louisville, KY 40205 | self | 10-23-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ | 2000.00 |
| | homemaker | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Russell J. Giganti 6901 E. 38th Street Indianapolis, IN 46226 | Giganti Co. | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date-\$ | 250.00 |
| | President | | |
| SUBTOTAL of Receipts This Page (optional) | | | 3300.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 14 of 32 for
 LINE NUMBER 11 (A)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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|---|---------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Richard W. Kelly 123 South 20th Street Terre Haute, IN 47803 | Bituminous Materials | 10-24-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Jean S. Ogden 402 B Mockingbird Valley Road Louisville, KY 40207 | self | 10-26-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 250.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Gladys Stone 1506 Baptist Towers Louisville, KY 40203 | none | 10-24-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ | 270.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Kate G. Davis 450 Swing Lane Louisville, KY 40207 | self employed | 10-23-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ | 500.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Eugene Goss Attorney-At-Law Harlan, KY 40831 | self | 10-23-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ | 250.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. W. S. Kilroy 1908 First City Nat. Bank Bldg. Houston, TX 77002 | self | 11-02-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation businessman | Aggregate Year-to-Date-\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Kathleen Peck P.O. Box 130 Russell Springs, KY 42642 | self | 10-22-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 500.00 |
| SUBTOTAL of Receipts This Page (optional): | | | 2600.00 |
| TOTAL This Period (last page this line number only): | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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(Use separate schedule for each
category of the Detailed
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| | | | |
|---|--|---|--|
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| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Ms. Frances K. Taylor 427 Helen Street Lake Charles, LA 70601 | | Name of Employer none | Date (month, day, year) 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation retired | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code Dr. Phillip R. Aaron Columbia, KY 42728 | | Name of Employer self | Date (month, day, year) 10-22-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation physician | Amount of Each Receipt This Period 500.00 |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Thomas G Dickerson 2229 McClellan Parkway Sarasota, FL 33579 | | Name of Employer Self-Employed | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Doctor | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. James G. Grissom Route 1, Box 50G Edmond, OK 73034 | | Name of Employer Windy Meadows Showtime | Date (month, day, year) 10-25-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Owner | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Kenneth S Kroehler Rt. 2, Box 319C Highlands, NC 28741 | | Name of Employer Information Requested | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Harry L. Pierson 2204 Comerica Bank Building Detroit, MI 48226 | | Name of Employer Information Requested | Date (month, day, year) 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code Mr. Edward D. Arnold 3758 S. Lakewood Drive Memphis, TN 38128 | | Name of Employer Retired | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 4250.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

SGM William J. Durr
 062 30 9958
 P. O. Box 700
 Fort Campbell, KY 42223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

U.S. Army

Occupation

SGM

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

40.00

Aggregate Year-to-Date-\$

225.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Anna Emery Hanson
 400 Arlington Avenue

Elmhurst, IL 60126

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Ms. Annette B. Lenz
 1602 Gardiner Ln., #121

Louisville, KY 40205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Precision Tool Die Mach. Co., Inc

Occupation

Secretary & Treasurer

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

30.00

Aggregate Year-to-Date-\$

225.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Linda Reece
 P.O. Box 8

Annville, KY 40402

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

1000.00

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. Donald H. Vish
 1107 Richmond Road

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

Attorney

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

900.00

Aggregate Year-to-Date-\$

900.00

F. Full Name, Mailing Address and ZIP Code

Mr. Estill Banks
 422 Cornelia Ave.

Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. G. S. Elrod
 P. O. Box 246

Pebble Beach, CA 93953

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Occupation

retired

Date (month,
day, year)

11-07-84

Amount of Each
Receipt This Period

500.00

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

3470.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedules for each
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. T Mitchell Hastings, Jr.
 PO Box 266

Dublin, NH 03444

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

Communications consultant

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Robert F. Linton
 P. O. Box 111

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

500.00

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. Ernest V Roberts
 8500 Steller Dr

Culver City, CA 90230

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

E V Roberts Inc.

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

Owner

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Louis A. Weil
 21 Ash Court

Lafayette, IN 47904

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Ms. Delores C. Bennett
 607 N. Main Street

Tompkinsville, KY 42167

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

300.00

Occupation

none

Aggregate Year-to-Date-\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. Fred M Fehsenfeld
 PO Box 68123

Indianapolis, IN 46268

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Asphalt Materials & Construction

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

500.00

Occupation

Chairman

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Frances Starks Heyburn
 3918 Leland Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-25-84

Amount of Each
 Receipt This Period

300.00

Occupation

homemaker

Aggregate Year-to-Date-\$

300.00

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Hugh O. Maclellan
109 E. Brow Road

Lookout Mountain, TN 37350

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Provident Life-Acc. Ins. Co.

10-22-84

Amount of Each
Receipt This Period

250.00

Occupation

Chairman

Aggregate Year-to-Date-\$ 250.00

B. Full Name, Mailing Address and ZIP Code

Mr. William R Runnells, Jr.
1104 Laskin Road

Virginia Beach, VA 23451

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Robert H. Wood
502 Ridgewood Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Charles C. Boyer
6804 Foxcroft Road

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

E. Full Name, Mailing Address and ZIP Code

Ms. Marion Forcht
Scenic View Heights

Corbin, KY 40701

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Wm Edward Hole
403 N Broadway

Greenville, OH 45311

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$ 250.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Julia S. McConnell
12 Sequoyah Drive

Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$ 2000.00

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL (if needed, list on this page)

SCHEDULE A

ITEMIZED RECEIPTS

Page 19 of 72 for
LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Mark Searce
P. O. Box 489

Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

11-19-84

Amount of Each
Receipt This Period

50.00

Occupation

merchant

Aggregate Year-to-Date-\$

275.00

B. Full Name, Mailing Address and ZIP Code

Mr. Thomas E. Carroll
P.O. Box 607

Monticello, KY 42633

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

50.00

Occupation

Attorney

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. R. A. Franzen
215 Coconut Palm Road

Boca Raton, FL 33452

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Dr. Robert S. Howell
3907 Old Brownsboro Rd

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Jewish Hospital

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

Doctor

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Leonard R. Short
Route 1

Hedden Road

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

50.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

210.00

F. Full Name, Mailing Address and ZIP Code

Mr. John E. Chowning
512 Fern Drive

Hollybrook Estates

Campbellsville, KY 42718

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Mayes, Gudderth & Etheredge, In.

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

250.00

Occupation

Senior Consultant

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Mr. O W Hyde
1623 E 1080 N

Logan, UT 84321

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 20 of 33
 LINE NUMBER 11 (A)
 (Use separate receipts for each category of the Detailed Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Richard E. Moore 6706 John Hancock Place Prospect, KY 40059 | Porter Paint Company | 10-26-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation General Management | Aggregate Year-to-Date-\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Kathleen D. Smith 2436 Brentwood Houston, TX 77019 | self | 11-01-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Magda F. Colli P. O. Box 22340 UPL Station San Juan, Puerto Rico, PR 00931 | University of Puerto Rico | 11-01-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Administrator | Aggregate Year-to-Date-\$ | 250.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Dan Geiger 144 Whirlaway Trail Corbin, KY 40701 | Information Requested | 10-19-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 500.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Samuel C. Johnson 4041 N. Main Street Racine, WI 53402 | S C Johnson & Son Inc. | 10-19-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman & CEO | Aggregate Year-to-Date-\$ | 500.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. J. R. Stansbury Main at Fifth Street London, KY 40741 | Lewis, Scoville, Scoville & Stay | 11-13-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date-\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Charlotte C. Couch 6015 Pine Forest Houston, TX 77057 | Information Requested | 11-01-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3800.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 21 of 22 for
LINE NUMBER 22-22
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Robert E. Gill
5812 Aura Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

200.00

Occupation

homemaker

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. W. C. Kelly, Jr.
2432 S. Gordon

Alvin, TX 77511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mrs. Jean S. Ogden
402 B Mockingbird Valley Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mrs. Gladys Stone
1506 Baptist Towers

Louisville, KY 40203

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date-\$

270.00

E. Full Name, Mailing Address and ZIP Code

Mr. Russell Harris Davis, Sr.
643 North 29th Street

Louisville, KY 40212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Lou. & Jeff. Co. Conv. Bureau

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Clerk

Aggregate Year-to-Date-\$

505.00

F. Full Name, Mailing Address and ZIP Code

Mrs. Grace P. Gourley
4301 Breckenridge Lane

Louisville, KY 40218

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

120.00

Occupation

homemaker

Aggregate Year-to-Date-\$

220.00

G. Full Name, Mailing Address and ZIP Code

Mr. Donald J. Perkins
Route #6
Highway 421
Lexington, KY 40511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self Employed

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

1000.00

Occupation

Contractor

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

1800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 22 of 72 for
 LINE NUMBER 11 (A)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Helen A Taylor
439 NE Lakeview Dr.

Sebring, FL 33870

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

Housewife

Aggregate Year-to-Date-\$

10-29-84

250.00

Amount of Each
Receipt This Period

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Norma B. Adams
P.O. Box 35

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Adams & Adams

Occupation

attorney

Aggregate Year-to-Date-\$

11-05-84

525.00

Amount of Each
Receipt This Period

200.00

C. Full Name, Mailing Address and ZIP Code

Mrs. W. David Disponett
Route 1, Box 316
Highway 127
Lawrenceburg, KY 40342

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$

10-26-84

250.00

Amount of Each
Receipt This Period

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Roy Guffey
1116 One Energy Square

Dallas, TX 75206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Roy Guffey Oil Company

Occupation

President

Aggregate Year-to-Date-\$

10-24-84

250.00

Amount of Each
Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Michael J. Kull
9109 Collingwood Road

Louisville, KY 40299

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Druthers

Occupation

Restaurant Executive

Aggregate Year-to-Date-\$

11-09-84

205.00

Amount of Each
Receipt This Period

30.00

F. Full Name, Mailing Address and ZIP Code

Mr. Edward Poitevent
28th Floor
225 Baronne Street
New Orleans, LA 70112

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Occupation

Attorney

Aggregate Year-to-Date-\$

10-19-84

250.00

Amount of Each
Receipt This Period

250.00

G. Full Name, Mailing Address and ZIP Code

Dr. John E. Trevey
5241 Tates Creek Rd.

Lexington, KY 40503

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Occupation

M. D.

Aggregate Year-to-Date-\$

11-15-84

500.00

Amount of Each
Receipt This Period

500.00

SUBTOTAL of Receipts This Page (optional)

1730.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 23 of 23 for
LINE NUMBER 11 (3)
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Kathleen B. Ashe
230 Peachtree Street
Suite 1100
Atlanta, GA 30303

Name of Employer

self

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

B. Full Name, Mailing Address and ZIP Code

SGM William J. Durr
062 30 9958
P. O. Box 700
Fort Campbell, KY 42223

Name of Employer

U.S. Army

Date (month,
day, year)

11-19-84

Amount of Each
Receipt This Period

50.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

SGM

Aggregate Year-to-Date-\$

225.00

C. Full Name, Mailing Address and ZIP Code

Mr. Harold W. Hardy
P. O. Box 37

Name of Employer

Hardy's Funeral Home

Date (month,
day, year)

10-30-84

Amount of Each
Receipt This Period

100.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Funeral/Director

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Ms. Annette B. Lenz
1602 Gardiner Ln., #121

Name of Employer

Precision Tool Die Mach. Co, Inc

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

30.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Secretary & Treasurer

Aggregate Year-to-Date-\$

225.00

E. Full Name, Mailing Address and ZIP Code

Mr. Walter S. Reichert
4909 E. Manslick Road

Name of Employer

E. I. DuPont

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

25.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Lab Tech

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Jack Voigt
2 Rio Vista Drive

Name of Employer

Self Employed

Date (month,
day, year)

10-23-84

Amount of Each
Receipt This Period

500.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Ins. Agent

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Ms. Mabel S. Barnett
954 Milford Lane

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2705.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11111
 (Use separate schedule for each category of the Detailed Summary Page)

Any information obtained from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Dr. William J. Engel
 6191 Inspiration Way

La Jolla, CA 92037

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
 day, year)

10-24-84

Amount of Each
 Receipt This Period

250.00

Occupation

physician

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Helen E. Hatcher
 The Lodge
 Highland Farms
 Black Mountain, NC 28711

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. George D. Lockhart
 1307 Commonwealth Bldg.

Pittsburgh, PA 15222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Ms. Esther S. K. Roberts
 253 Round Hill Road

Greenwich, CT 06830

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

350.00

E. Full Name, Mailing Address and ZIP Code

Mr. John H. Wertz
 20762 Beach Blvd.

Rocky River, OH 44116

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Independent Explosives, Inc.

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

250.00

Occupation

businessman

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Allen D. Berry, Jr.
 Route 7, Berry Chapel Road

Franklin, TN 37064

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Berry Wholesale Co.

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

500.00

Occupation

Wholesaler

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. J. Smith Ferebee
 P.O. Box 8256

Richmond, VA 23226

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Equitable Life

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

250.00

Occupation

Consultant

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 25 of 72 for
LINE NUMBER 11-12
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. R J Higginson
c/o Shagbark
Route 11, Whispering Oaks
Sevierville, TN 37862

Name of Employer

none

Date (month,
day, year)

10-29-84

Amount of Each
Receipt this Period

250.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Retired

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Bob Magness
4725 South Holly Street
Englewood, CO 80111

Name of Employer

TCI, Inc.

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

director

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. William R Runnells, Jr.
1104 Laskin Road
Virginia Beach, VA 23451

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

150.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Leon Woodrow
439 Meadow Lane
Danville, KY 40422

Name of Employer

Sellers Engineering Co.

Date (month,
day, year)

11-14-84

Amount of Each
Receipt This Period

50.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Vice President

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Merom Brachman
311 N. Drexel
Columbus, OH 43209

Name of Employer

Information Requested

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Information Requested

Aggregate Year-to-Date-\$

400.00

F. Full Name, Mailing Address and ZIP Code

Mr. Duffy L. Ford
200 South Second Street
#10
Richmond, KY 40475

Name of Employer

self

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

249.10

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

C P A

Aggregate Year-to-Date-\$

749.10

In-Kind
Advertising

G. Full Name, Mailing Address and ZIP Code

Mr. Robbie Holloway
12524 Renoir Lane
Dallas, TX 75230

Name of Employer

Humble Exploration Company

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Occupation

Executive VP

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2199.10

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 25 of 72
 LINE NUMBER 11 (11)
 (Use separate schedule for each category of the Detailed Summary Page)

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|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Gordon McCoy P. O. Box 1146 Winnemucca, NE 89445 | self | 11-01-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation farmer | Aggregate Year-to-Date-\$ | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Roger Schoerner Route 9 Box 644 Carrollton, GA 30117 | Southwire Co. | 10-19-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Sr. Vice President | Aggregate Year-to-Date-\$ | 250.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Thomas E. Carroll P.O. Box 607 Monticello, KY 42633 | self | 11-20-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ | 250.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Calvin W. Fraser 617 Kerry Lane McAllen, TX 78501 | none | 10-24-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Lucy Huddleston Route 1, Box 40 Nortonville, KY 42442 | self | 11-05-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | Aggregate Year-to-Date-\$ | 235.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Jon T. Miho 190 S. King Street, #1500 Honolulu, HI 96813 | Fong & Miho | 11-05-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date-\$ | 350.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Leonard R. Short Route 1 Hedden Road Versailles, KY 40383 | Information Requested | 11-15-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 210.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 1780.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 27 of 33 for
 LINE NUMBER 11-62
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Barbara Bullitt Christian
 3601 Axton Lane
 Frogs Jump Skylight
 Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

100.00

Occupation

Investments

Aggregate Year-to-Date--\$

575.00

B. Full Name, Mailing Address and ZIP Code

Mr. Kenneth A Gablin
 6749 Towne Lane Rd.

McLean, VA 22101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Consulting Engineer

Aggregate Year-to-Date--\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. William H. Hyde
 2601 Via Ramon

Palos Verdes Estates, CA 90274

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date--\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Richard E. Moore
 6706 John Hancock Place

Prospect, KY 40059

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Porter Paint Company

Date (month,
day, year)

11-14-84

Amount of Each
Receipt This Period

50.00

Occupation

General Management

Aggregate Year-to-Date--\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Sidney V. Smith
 1801 Main, Suite 600

Houston, TX 77002

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

The Horne Co.

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

Vice Chairman

Aggregate Year-to-Date--\$

250.00

F. Full Name, Mailing Address and ZIP Code

Ms. Charlotte Collins
 1801 45th St., NW

Washington, DC 20007

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Roger McCormick Foundation

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

1000.00

Occupation

President

Aggregate Year-to-Date--\$

1000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth S. Geiger
 Box 321

Somerville, NJ 08876

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Occupation

homemaker

Aggregate Year-to-Date--\$

250.00

SUBTOTAL of Receipts This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (a)
 (Use separate schedules for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth F. Jones
 1705 Lynn Way

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Jefferson County Government

Date (month, day, year)

11-01-84

Amount of Each Receipt This Period

100.00

Occupation

Administrator

Aggregate Year-to-Date-\$

300.00

B. Full Name, Mailing Address and ZIP Code

Mr. Samuel Stark
 2501 NW 75th St.

Miami, FL 33147

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Star Cem. Co.

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

Exec.

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Fred H. Courtenay
 4003 Flint Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Hilliard, Lyons, Inc.

Date (month, day, year)

11-13-84

Amount of Each Receipt This Period

100.00

Occupation

Investment Counselor

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. E S Gillette, Jr.
 945 Green St.

San Francisco, CA 94133

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Robert E Kempf, Jr.
 515 Michigan Ave

Jeffersonville, IN 47130

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Exit Co.

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Henry Stratton
 PO Box 851

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$

500.00

G. Full Name, Mailing Address and ZIP Code

Mr. Douglas Dean
 1630 Fincastle Road

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Date (month, day, year)

10-26-84

Amount of Each Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 29 of 72 for
LINE NUMBER 11111111
(Use separate schedule for each
category of the Detailed
Summary Page)

| | | | |
|---|--|---|------------------------------------|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (If Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mrs. Grace P. Gourley 4301 Breckenridge Lane Louisville, KY 40218 | | self | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation homemaker | |
| | | Aggregate Year-to-Date-\$ | 220.00 |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, KY 40243 | | Copy Corporation | 87.50 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation owner | In-kind Office Equipment |
| | | Aggregate Year-to-Date-\$ | 1700.00 |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Ms. Rose M. Perkins 2587 Westmoreland Lexington, KY 40510 | | self employed | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Don Perkins & Assoc. Inc. | |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Dr. John M. Templeton, Jr. 601 Pembroke Road Bryn Mawr, PA 19010 | | self | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation physician | |
| | | Aggregate Year-to-Date-\$ | 300.00 |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mrs. Norma B. Adams P.O. Box 35 Somerset, KY 42501 | | Adams & Adams | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation attorney | |
| | | Aggregate Year-to-Date-\$ | 525.00 |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Chester A. Dixon Box 970 Hyden, KY 41749 | | none | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Retired | |
| | | Aggregate Year-to-Date-\$ | 1030.00 |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Harry E. Guyselman 1700 Wellington Lansing, MI 48910 | | Information Requested | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 1337.50 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 30 of 72 for
LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| | | | |
|---|--|--|--|
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| Name of Committee (In Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. David W. Potter P. O. Box 2854 Pikeville, KY 41501 | | Name of Employer Information Requested | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt this Period 500.00 |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. John B. Ashmun 1200 Smith, Suite 1500 Houston, TX 77002 | | Name of Employer Wainoco Oil Corp. | Date (month, day, year) 11-05-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President | Amount of Each Receipt This Period 30.00 |
| | | Aggregate Year-to-Date-\$ | 230.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. Willard D. Eason Box 595 Nashville, IN 47448 | | Name of Employer self | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Farmer | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 280.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. Harold W. Hardy P. O. Box 37 Shepherdsville, KY 40165 | | Name of Employer Hardy's Funeral Home | Date (month, day, year) 11-14-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Funeral/Director | Amount of Each Receipt This Period 50.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Chet Leonhardt 3049 Rolling Stone Oklahoma City, OK 73120 | | Name of Employer Information Requested | Date (month, day, year) 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Jimmy Reliford Rt. 2 Box 619A Columbia, KY 42728 | | Name of Employer Jimmy Reliford Drilling Co. | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Drilling Contractor | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code Mrs. Naomi C. Voyles 2104 Eastern Parkway Louisville, KY 40204 | | Name of Employer Self | Date (month, day, year) 11-13-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Housewife | Amount of Each Receipt This Period 100.00 |
| | | Aggregate Year-to-Date-\$ | 350.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2930.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11-251
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category of the Detailed
Summary Page)

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|---|-------------------------------------|-----------------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Debra Baron 1230 Liberty Bank Lane, Ste. 330 Louisville, KY 40222 | self | 10-31-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 2000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Nejat Erem 777 Washington Avenue Carlstadt, NJ 07072 | Self | 11-21-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Erskine D. Hawkins 1245 Lock Lomond Trail Atlanta, GA 30331 | Southeast Training Corp. | 11-13-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. William W Lockridge Route 1 McCracken Pike Lexington, KY 40383 | Ashford Stud | 10-19-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Managing Partner | Aggregate Year-to-Date-\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Herbert W. Robinson Box 17107 Fountain Hills, AZ 85268 | IMS Corp. | 10-29-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation businessman | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Sol West, III 10807 Bellagor Road Los Angeles, CA 90077 | Information Requested | 11-21-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Guy Bjorkman 645 Madison Avenue New York, NY 10022 | none | 11-01-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4250.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (23)
(Use separate schedule(s) for each
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Margaret L. Fields
7408 Dixie Highway

Florence, KY 41042

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

25.00

Occupation

Real Estate Broker

Aggregate Year-to-Date-\$

265.00

B. Full Name, Mailing Address and ZIP Code

Mr. Al G. Hill, Jr.
Thanksgiving Tower

Dallas, TX 75201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

oil producer

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Bob Magness
4725 South Holly Street

Englewood, CO 80111

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

TCI, Inc.

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

executive

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. H. Thomas Sanders, Jr.
Route #2

Smiths Grove, KY 42171

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

350.00

E. Full Name, Mailing Address and ZIP Code

Mr. John W. Woods, III
2900 Cogan Street
P. O. Box 1270
Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

75.00

Occupation

Banker

Aggregate Year-to-Date-\$

225.00

F. Full Name, Mailing Address and ZIP Code

Mr. Merom Brachman
311 N. Drexel

Columbus, OH 43209

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-08-84

Amount of Each
Receipt This Period

150.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

400.00

G. Full Name, Mailing Address and ZIP Code

Mr. Stanley W. Hong
4563 Waikui St.

Honolulu, HI 96821

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hawaii Visitors Bureau

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

100.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11-05-84
(Use separate schedule for each
category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Leonard McCoy 881 Corporate Drive Suite 206 Lexington, KY 40503 | Name of Employer Information Requested | Date (month, day, year) 11-05-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 400.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. James P. Schwartz 525 Heckor Avenue Metairie, LA 70005 | Name of Employer Jimeo, Inc. | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman | Aggregate Year-to-Date—\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mrs. Stephen C. Casagrande 810 West Broadway Louisville, KY 40202 | Name of Employer self | Date (month, day, year) 10-25-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code Ms. Abigail G. Freed 2700 Virginia Ave. NW Watergate West Washington, DC 20037 | Name of Employer Self-Employed | Date (month, day, year) 10-19-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Investor | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | Name of Employer Self Employed | Date (month, day, year) 10-26-84 | Amount of Each Receipt This Period 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Auto Dealer | Aggregate Year-to-Date—\$ 900.00 | In-Kind Campaign Car |
| F. Full Name, Mailing Address and ZIP Code Mr. Bernard Miller P. O. Box 1107 Fairbanks, AK 99707 | Name of Employer self | Date (month, day, year) 11-07-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Business Advertising | Aggregate Year-to-Date—\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. John E. Henley Shot, Jr. 4200 Country Club Drive Long Beach, CA 90807 | Name of Employer self | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation investments | Aggregate Year-to-Date—\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4500.00 |
| TOTAL This Period (list page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1112
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Barbara Bullitt Christian
3601 Axton Lane
Frogs Jump Skylight
Prospect, KY 40059

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt this Period

25.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Investments

Aggregate Year-to-Date-\$

575.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Jeanette K. Gamble
710 S. Hanley Road
Apt. 12-D
St. Louis, MO 63105

Name of Employer

none

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

retired

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. J. Courtney Ivey
4739 S. Lake Drive
Delray Dunes
Boynton Beach, FL 33436

Name of Employer

none

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Retired

Aggregate Year-to-Date-\$

280.00

D. Full Name, Mailing Address and ZIP Code

Mr. William B. Moore
400 Country Lane

Name of Employer

self

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

100.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Architect

Aggregate Year-to-Date-\$

265.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Alida S. Snow
P. O. Box 23

Name of Employer

C. S. Practioner

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Executive

Aggregate Year-to-Date-\$

750.00

F. Full Name, Mailing Address and ZIP Code

Mr. H. G. Gelhardt, III
20751 Sorolla Terrace

Name of Employer

MAC-USA, Inc.

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Exec. Vice President

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. Jennings A. Jones
204 Apollo Drive

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

retired

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (a)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|-------------------------------------|-----------------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. W.T. Neal, Jr. P.O. Box 299 Brewton, AL 36427 | T.R. Miller Mill Co. Inc | 10-19-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Thorton Stearns 5 Fernway Winchester, MA 01890 | Vacum Barrier Corp. | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. W. H. Crain 2511 San Gabriel Street Austin, TX 78705 | University of Texas | 11-01-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Curator | Aggregate Year-to-Date-\$ 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. James S Gilmore, Jr. 202 Michigan Bldg. Kalamazoo, MI 49007 | Jim Gilmore Enterprises | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation CEO and Chairman | Aggregate Year-to-Date-\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Marron Kendrick 398 Walsh Road Atherton, CA 94025 | Information Requested | 10-31-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Benedict V. Palmer-Ball, Sr. 8203 Old Westport Road Louisville, KY 40222 | Palmer Products | 11-09-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Production Mgr. | Aggregate Year-to-Date-\$ 210.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Mary C. Delaney 805 Lincoln Highway North Versailles, PA 15137 | self | 10-22-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 210.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2130.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|--|---|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Sloane Graff, Jr. 3900 Barbour Ln. Box 22311 Louisville, KY 40222 | Name of Employer none | Date (month, day, year) 10-22-84 | Amount of Each Receipt This Period 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date—\$ 270.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Lloyd J. King 5555 Bowles Lake Lane Littleton, CO 80123 | Name of Employer Information Requested | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 400.00 | |
| C. Full Name, Mailing Address and ZIP Code Ms. Rose M. Perkins 2587 Westmoreland Lexington, KY 40510 | Name of Employer self employed | Date (month, day, year) 11-16-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Don Perkins & Assoc. Inc. | Aggregate Year-to-Date—\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Emanuel Turner 111 Chateaux Dr Palm Beach, FL 33480 | Name of Employer Midland Glass Co | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman & CEO | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Chester A. Dixon Box 970 Hyden, KY 41749 | Name of Employer none | Date (month, day, year) 11-16-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date—\$ 1030.00 | |
| F. Full Name, Mailing Address and ZIP Code Mrs. Pauline P. Hadley 340 East 50th Street New York, NY 10022 | Name of Employer none | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation semi-retired | Aggregate Year-to-Date—\$ 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Franklin T. Lambert 2920 Rainbow Drive Louisville, KY 40206 | Name of Employer Information Requested | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1425.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Lee F. Powell
3649 Forest Circle

Paducah, KY 42001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Old Hickory Clay Co.

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

50.00

Occupation

mining Ceramic Clays

Aggregate Year-to-Date-\$ 350.00

B. Full Name, Mailing Address and ZIP Code

Mr. Barney Tucker
1628 Richmond Rd.

Lexington, KY 40502

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Top Yield, Inc.

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

50.00

Occupation

Business Executive

Aggregate Year-to-Date-\$ 250.00

C. Full Name, Mailing Address and ZIP Code

Mr. John D. Askew
P. O. Box 1342

Fayetteville, AR 72702

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Askew Enterprises

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Willard D. Eason
Box 595

Nashville, IN 47448

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

30.00

Occupation

Farmer

Aggregate Year-to-Date-\$ 280.00

E. Full Name, Mailing Address and ZIP Code

Mr. Joseph L. Hargrove
700 Commercial Nat. Bank Bldg.

Shreveport, LA 71101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-Employed

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

250.00

Occupation

Oil & Gas Producer

Aggregate Year-to-Date-\$ 250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Lawrence Lewis
104 Bentley Avenue
P. O. Box 180

Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self employed

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

100.00

Occupation

Grocer

Aggregate Year-to-Date-\$ 500.00

G. Full Name, Mailing Address and ZIP Code

Mr. George R. Wackenhut
20 Casuarina Concourse

Coral Gables, FL 33143

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional)

980.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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|---|--|-----------------------------------|------------------------------------|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Debra Baron 1230 Liberty Bank Lane, Ste. 330 Louisville, KY 40222 | self | 10-31-84 | 1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 2000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. George K. Erganian 7410 Central Avenue Indianapolis, IN 46240 | self | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation consulting engineer | Aggregate Year-to-Date-\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Lionel Hawse 701 Old Dobbin Road Lexington, KY 40502 | self | 10-19-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date-\$ 750.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. D. Covington Logan P. O. Box 4217 Louisville, KY 40204 | Information Requested | 10-26-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 330.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Augusta D. Roddis 1108 East Fourth Street Marshfield, WI 54449 | none | 10-24-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Richard White P. O. Box 546 Morehead, KY 40351 | self-employed | 10-23-84 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation businessman | Aggregate Year-to-Date-\$ 700.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. David S. Blue 301 E. Main Street Louisville, KY 40202 | Louisville Scrap Material Co., | 11-09-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive Vice President | Aggregate Year-to-Date-\$ 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2750.00 |
| TOTAL This Period (last page this line number only) | | | |

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|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Margaret L. Fields 7408 Dixie Highway Florence, KY 41042 | Self | 11-19-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Real Estate Broker | Aggregate Year-to-Date-\$ | 265.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. James D. Hill 832 Kentucky Blvd. Hazard, KY 41701 | Perry Oil Co., Inc. | 10-22-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ | 1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Gerald D. Mann 8102 Bayberry Court Indianapolis, IN 46250 | Information Requested | 11-01-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. H. Thomas Sanders, Jr. Route #2 Smiths Grove, KY 42171 | Information Requested | 11-01-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 350.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Wilmer R. Wright 6152 N. Verde Trail Apt D-101 Boca Raton, FL 33433 | Wilmer Wright Assoc. Inc. | 10-23-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Management Consultant | Aggregate Year-to-Date-\$ | 380.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Arthur S. Brinkley, Jr. P.O. Box 1483 Richmond, VA 23212 | virginia Capital Corp. | 10-19-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Sr. Vice President | Aggregate Year-to-Date-\$ | 500.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Martha Murray Fortune 7650 W 96th St. Zionsville, IN 46077 | | 10-29-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | Aggregate Year-to-Date-\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2880.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

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| | | | |
|---|--|---|--|
| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Gordon H. Hood 142 Park Rd. Ft. Mitchell, KY 41011 | | Name of Employer Heckerman & Hood | Date (month, day, year) 10-30-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation lawyer | Amount of Each Receipt This Period 150.00 |
| | | Aggregate Year-to-Date-\$ | 450.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Frank S McGehee 8112 Jose Circle W Jacksonville, FL 32217 | | Name of Employer Mac Papers Inc. | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| C. Full Name, Mailing Address and ZIP Code Ms. Mary Hugh Scott Suite 103 W. Thatcher Building Pueblo, CO 81003 | | Name of Employer Information Requested | Date (month, day, year) 11-05-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt This Period 500.00 |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. H. J. Casey 6339 N. E. Sandy Blvd. Portland, OR 97213 | | Name of Employer Information Requested | Date (month, day, year) 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested | Amount of Each Receipt This Period 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Fred Friel, Jr. P.O. Box 7 Annapolis Junction, MD 20701 | | Name of Employer Bendix | Date (month, day, year) 10-19-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Consultant | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Roy H. Hunt 1203 Park Hill Court Louisville, KY 40207 | | Name of Employer Hunt Trac & Equip. Co. | Date (month, day, year) 10-24-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation owner | Amount of Each Receipt This Period 50.00 |
| | | Aggregate Year-to-Date-\$ | 285.00 |
| G. Full Name, Mailing Address and ZIP Code Mr. Donald Lane Miller Penny Cove Wicomico Church, VA 22579 | | Name of Employer Braddock Publishing Co. | Date (month, day, year) 10-22-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Executive | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2450.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 41 of 72 for
LINE NUMBER 11 (a)
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. James A. Shuffett
1200 Second National Plaza

Lexington, KY 40507

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-26-84

Amount of Each
Receipt This Period

100.00

Occupation

Attorney

Aggregate Year-to-Date-\$

350.00

B. Full Name, Mailing Address and ZIP Code

Mr. L. Wayne Cisney, Jr.
402 Paradise Street

Greenville, KY 42345

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

(self) Cisney & Cisney

Date (month,
day, year)

10-26-84

Amount of Each
Receipt This Period

250.00

Occupation

Attorney

Aggregate Year-to-Date-\$

350.00

C. Full Name, Mailing Address and ZIP Code

Mr. George C. Garcia
#1 River Hill Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. J. Courtney Ivey
4739 S. Lake Drive
Delray Dunes
Boynton Beach, FL 33436

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-20-84

Amount of Each
Receipt This Period

30.00

Occupation

Retired

Aggregate Year-to-Date-\$

280.00

E. Full Name, Mailing Address and ZIP Code

Mr. Wesley C. Morck
14 Old Military Road

Hilton Head Island, SC 29928

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

F. Full Name, Mailing Address and ZIP Code

Dr. Henry S Spencer, MD
7702 Parham Road

Richmond, VA 23229

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self-employed

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Doctor

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. Lee Gentil
GPO Box 4804

San Juan, PR 00936

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Boringuen Insulation Co., Inc.

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2130.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 42 of 72 for
 LINE NUMBER 11 (A)
 (Use separate schedule for each
 category of this detailed
 Summary Page)

Any Information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Warren F. Jones
 5636 Murietta Avenue**

Van Nuys, CA 91401

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-26-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **500.00**

B. Full Name, Mailing Address and ZIP Code

**Mr. John T. Nelson
 7647 National Turnpike**

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-25-84

Amount of Each
 Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **600.00**

C. Full Name, Mailing Address and ZIP Code

**Mr. James Steinman
 1822 N. Hi Mount Blvd.**

Milwaukee, WI 53208

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **500.00**

D. Full Name, Mailing Address and ZIP Code

**Mr. Calvin D. Cranfill
 Box 2031**

Lexington, KY 40594

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Radwan & Cranfill

Date (month,
 day, year)

11-15-84

Amount of Each
 Receipt This Period

50.00

Occupation

CPA

Aggregate Year-to-Date-\$ **250.00**

E. Full Name, Mailing Address and ZIP Code

**Mr. Donald E. Girdler
 551 Anderson Dr.**

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **500.00**

F. Full Name, Mailing Address and ZIP Code

**Mr. Marron Kendrick
 398 Walsh Road**

Atherton, CA 94025

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

750.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **1000.00**

G. Full Name, Mailing Address and ZIP Code

**Ms. Kathleen C. Parriott
 2545 East 31st Street**

Tulsa, OK 74103

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ **1000.00**

SUBTOTAL of Receipts This Page (optional)

3400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 43 of 43 for
LINE NUMBER 11-84
(Use separate schedules for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mrs. Mary C. Delaney
805 Lincoln Highway**

North Versailles, PA 15137

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-26-84

Amount of Each
Receipt This Period

10.00

Occupation

homemaker

Aggregate Year-to-Date-\$

210.00

B. Full Name, Mailing Address and ZIP Code

**Mrs. Mary S. Graham
10504 Florian Rd.**

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

50.00

Occupation

Retired

Aggregate Year-to-Date-\$

355.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Lloyd J. King
5555 Bowles Lake Lane**

Littleton, CO 80123

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

100.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

400.00

D. Full Name, Mailing Address and ZIP Code

**Mr. Will C. Perry
18630 Barbuda Lane**

Houston, TX 77058

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

**Mr. John Nay Thomas
P. O. Box 61**

Longview, TX 75606

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

Investor

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

**Mr. George E. Allen, Jr.
1809 Staples Mill Road**

P. O. Box 6855

Richmond, VA 23230

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Allen, Allen & Allen

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

Co-owner

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

**Mr. William R. Doan
P. O. Box 222**

Jackson, KY 41339

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

2160.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 44 of 72
 LINE NUMBER 11 (A)
 (Use separate schedule(s) for each category of receipts detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Otto V Haleck
 PO Box 99**

Pago Pago, Samoa, 96799

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Haleck West, Inc

Occupation

President

Aggregate Year-to-Date-\$

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Russell Land
 101 North Porter Drive**

Richmond, KY 40475

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

farmer

Aggregate Year-to-Date-\$

Date (month, day, year)

11-13-84

Amount of Each Receipt This Period

50.00

C. Full Name, Mailing Address and ZIP Code

**Ms. Judith S. Raese
 233 Lebanon Street**

Morgantown, WV 26505

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Occupation

homemaker

Aggregate Year-to-Date-\$

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

**Dr. Than Tun
 P. O. Box 1116**

Wahiawa, HI 96786

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Occupation

Physician

Aggregate Year-to-Date-\$

Date (month, day, year)

10-24-84

Amount of Each Receipt This Period

250.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Raymond Eastburn
 2620 Cove Cay Drive #606**

Clearwater, FL 30520

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Occupation

Retired

Aggregate Year-to-Date-\$

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

250.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Dwight Harrigan
 PO Box 38**

Fulton, AL 36446

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Scotch Lumber Co.

Occupation

VP

Aggregate Year-to-Date-\$

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

G. Full Name, Mailing Address and ZIP Code

**Mr. R A Lile
 1600 Tower Building**

Little Rock, AR 72201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Retired

Occupation

Retired

Aggregate Year-to-Date-\$

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

TOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 12-12
 (Use separate schedules for each
 category of this Detailed
 Summary Page)

| | | | |
|---|--|--|---|
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| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Brooks Walker, Jr. 615 Battery St., Suite 600 San Francisco, CA 94111 | | Name of Employer U.S. Leasing | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Executive | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. James H. Barr 218 Choctaw Road Louisville, KY 40207 | | Name of Employer Federal Government | Date (month, day, year) 10-31-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation U. S. Attorney | Amount of Each Receipt This Period 150.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| C. Full Name, Mailing Address and ZIP Code Mr. J. T. Estes Box 26 Cantonment, FL 32533 | | Name of Employer Estates Forest Products | Date (month, day, year) 10-24-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Executive | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| D. Full Name, Mailing Address and ZIP Code Mr. Will H. Hays, Jr. 208 Union Federal Building Crawfordsville, IN 47933 | | Name of Employer self employed | Date (month, day, year) 10-24-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation writer | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. D. Irving Long 2112 River Bluff Road Louisville, KY 40207 | | Name of Employer 4th Ave. Corporation | Date (month, day, year) 10-24-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation President-real Estate | Amount of Each Receipt This Period 100.00 |
| | | Aggregate Year-to-Date-\$ | 400.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Carl G. Roth 13000 Osage Road Louisville, KY 40222 | | Name of Employer Ford Motor Company | Date (month, day, year) 10-25-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation MEG. OPNS MGR. TRUCK OPNS | Amount of Each Receipt This Period 100.00 |
| | | Aggregate Year-to-Date-\$ | 340.00 |
| G. Full Name, Mailing Address and ZIP Code Mr. Charles Whittingham 88 Lowell Ave Sierra Madre, CA 91024 | | Name of Employer Self-Employed | Date (month, day, year) 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Owns/Trains Horses | Amount of Each Receipt This Period 250.00 |
| | | Aggregate Year-to-Date-\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 1350.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11(a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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|---|----------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mr. James Martin Hill, Jr. 3244 Huntingdon Houston, TX 77091 | Hill & White Apt. Builders | 10-29-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Owner | | |
| | Aggregate Year-to-Date-\$ | 350.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Lee Mattingly waiting Mike get correct address, KY 40000 | Information Requested | 10-25-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Information Requested | | |
| | Aggregate Year-to-Date-\$ | 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. H. Thomas Sanders, Jr. Route #2 Smiths Grove, KY 42171 | Information Requested | 11-19-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Information Requested | | |
| | Aggregate Year-to-Date-\$ | 350.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William B. Yarmuth 142 Chenoweth Lane Louisville, KY 40207 | Information Requested | 10-23-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Information Requested | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. C. William Briscoe Rt 2, Box 307-C Fern Hill Corbin, KY 40701 | Self | 10-29-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | M.D. | | |
| | Aggregate Year-to-Date-\$ | 350.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Ben B. Fowler 500 McClure Building Frankfort, KY 40601 | self employed | 10-24-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | Attorney | | |
| | Aggregate Year-to-Date-\$ | 280.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert L. Hook 4114 Bardstown Road Louisville, KY 40218 | self | 11-13-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | Occupation | | |
| <input type="checkbox"/> Other (specify): | car dealer | | |
| | Aggregate Year-to-Date-\$ | 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2100.00 |
| TOTAL This Period (list page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 33-721
 (Use separate schedule for each category of the Detailed Summary Page)

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|---|--|--|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Russell Scott, Jr. Suite 103 W. Thatcher Building Pueblo, CO 81003 | | Information Requested 11-05-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested Aggregate Year-to-Date-\$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. W. T. Cassels, Sr. P. O. Box 5887 Columbia, SC 29205 | | S. E. Freight Line 11-01-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Freight Transportation Aggregate Year-to-Date-\$ 600.00 | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. J. Burton Frierson 613 E. Brow Road Lookout Mountain, TN 37350 | | None 10-19-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Retired Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Roy H. Hunt 1203 Park Hill Court Louisville, KY 40207 | | Hunt Trac & Equip. Co. 11-14-84 | 35.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation owner Aggregate Year-to-Date-\$ 285.00 | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Rowland D. Miller 6408 Longview Lane Louisville, KY 40222 | | self 10-26-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Architect Aggregate Year-to-Date-\$ 280.00 | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. Charles J. Simas 42 Oxford Street Arlington, MA 02174 | | Information Requested 11-01-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Information Requested Aggregate Year-to-Date-\$ 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Amount of Each Receipt This Period |
| Mr. L. Wayne Cisney, Jr. 402 Paradise Street Greenville, KY 42345 | | (self) Cisney & Cisney 11-01-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Attorney Aggregate Year-to-Date-\$ 350.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2435.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11-84
 (Use separate schedule(s) for each category of (a) Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. F. R. Gardner
 2199 Astor Street, #205**

Orange Park, FL 32073

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month, day, year)

10-24-84

Amount of Each Receipt This Period

250.00

Occupation

farmer

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

**Dr. Jeanne Jaggard
 54 Stewart Street**

Passaic, NJ 07055

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date-\$

350.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Dan M. Morgan
 P.O. Box 999**

Jackson, MS 39205

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

C L Morgan Estate

Date (month, day, year)

10-19-84

Amount of Each Receipt This Period

250.00

Occupation

Geologist

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

**Dr. Dan M. Spengler
 5400 Stanford Drive**

Nashville, TN 37215

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month, day, year)

10-24-84

Amount of Each Receipt This Period

250.00

Occupation

Physician

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

**Mr. Arthur V. Geringer
 4611 Deseret Drive**

Woodland Hills, CA 91364

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month, day, year)

11-01-84

Amount of Each Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Sholly Kagan
 P. O. Box 508**

Windham, NH 03087

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

"I"

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

250.00

Occupation

COB

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

**Mr. John T. Nelson
 7647 National Turnpike**

Louisville, KY 40214

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month, day, year)

11-01-84

Amount of Each Receipt This Period

200.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

600.00

SUBTOTAL of Receipts This Page (optional)

1950.00

TOTAL This Period (last page only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any information obtained from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Arthur Stephens P. O. Box 307 Huntsville, AL 35804 | Stevens, Millirons, & Harrison | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date-\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. James D. Crase 600 Little Creek Road Somerset, KY 42501 | Self | 10-26-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. C. Walter Glanz 2482 Bardstown Road Louisville, KY 40205 | Glanz Plumbing & Heating | 10-29-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Mechanical Contractor | Aggregate Year-to-Date-\$ | 230.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. A. T. Kennedy P. O. Box 93406 Atlanta, GA 30377 | Davidson-Ken Company | 10-24-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Jacque Parsley 215 Pleasantview Avenue Louisville, KY 40206 | Information Requested | 11-01-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 1000.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. O. H. Delchamps, Jr. P.O. 1668 Mobile, AL 36601 | Delchamps, Inc. | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Corp Exec. | Aggregate Year-to-Date-\$ | 250.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ms. Dorothy A Grant 955 Park Ave New York, NY 10028 | Self-Employed | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Investments | Aggregate Year-to-Date-\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2350.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 50 of 72 for
 LINE NUMBER 17 (a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information supplied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Norman V. Kinsey
 Suite 1805, Louisiana Tower
 401 Edwards Street
 Shreveport, LA 71101

Name of Employer

Kinsey Interest

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt this Period

250.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

president

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Doris Petercheff
 Route 6 Box 186

Name of Employer

self

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

homemaker

Aggregate Year-to-Date-\$

500.00

C. Full Name, Mailing Address and ZIP Code

Mr. J. H. Thornton
 2877 Iron Works Road

Name of Employer

Information Requested

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

1000.00

Georgetown, KY 40324

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

D. Full Name, Mailing Address and ZIP Code

Mr. Joseph A Allen
 882 Oak Ridge Road

Name of Employer

Duffs Quality Inn

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

250.00

Winchester, VA 22601

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

President

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mrs. Jeannette E. Donley
 3007 Jarvis Woods Court

Name of Employer

Wm.M.Mercer/Meidinger Inc.

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

50.00

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Consultant

Aggregate Year-to-Date-\$

300.00

F. Full Name, Mailing Address and ZIP Code

Mr. David V. Hall
 618 Hatherleigh Lane

Name of Employer

Cardinal Medical Corp.

Date (month,
 day, year)

10-25-84

Amount of Each
 Receipt This Period

1000.00

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Businessman

Aggregate Year-to-Date-\$

2000.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Elizabeth L. Lang
 P.O. Box 190

Name of Employer

self employed

Date (month,
 day, year)

10-25-84

Amount of Each
 Receipt This Period

500.00

Goshen, KY 40026

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Occupation

Horsebreeder

Aggregate Year-to-Date-\$

525.00

SUBTOTAL of Receipts This Page (optional):

3550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 13-93
 (Use separate sheets for each category of the Detailed Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Eugene C. Rainis Mountainside Road Mendham, NJ 07945 | Brown Brothers | 11-01-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | Aggregate Year-to-Date-\$ | |
| | | 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles Turner 1055 B. Peterson Louisville, KY 40214 | none | 11-01-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Miles A. Bailey, Jr. 9804 Reynolda Road Louisville, KY 40223 | La-Z-Boy Showcase Shoppe | 10-26-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Bernard A. Egan 1900 Old Dixie Highway Fort Pierce, FL 33450 | Egan, Fickett & Co. | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Henry Upham Harris 55 Brookville Road Glen Head, NY 11545 | none | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Marie B. Lynch 3818 Washington Sq. Apt. 11 Louisville, KY 40207 | none | 10-22-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation none | Aggregate Year-to-Date-\$ | |
| | | 280.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Peyton Reynolds Box 160 Whitesburg, KY 41858 | self | 11-15-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1950.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 52 of 73 for
 LINE NUMBER 1178
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

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|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Ms. Ellen Ruth Walker 317 North Country Club Drive Lantana, FL 33462 | Name of Employer Information Requested | Date (month, day, year) 11-07-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date—\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. David M. Barrett 2555 M. Street, NW No. 100 Washington, DC 20037 | Name of Employer Barrett & Hanna | Date (month, day, year) 11-21-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation partner | Aggregate Year-to-Date—\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. S. D. Falkenbury, Jr. P. O. Box 384 Concord, NC 28025 | Name of Employer Clark Tribble, Harris | Date (month, day, year) 11-02-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Consultant | Aggregate Year-to-Date—\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Vernon H. Heath 4725 Hibiscus Avenue Minneapolis, MN 55435 | Name of Employer Rosemont, Inc. | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. John H. Louis 1500 Sheridan Road Wilmette, IL 48127 | Name of Employer self | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date—\$ 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Carl G. Roth 13000 Osage Road Louisville, KY 40222 | Name of Employer Ford Motor Company | Date (month, day, year) 11-13-84 | Amount of Each Receipt This Period 40.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation MEG, OPNS Mgr. Truck OPNS | Aggregate Year-to-Date—\$ 340.00 | |
| G. Full Name, Mailing Address and ZIP Code Dr. Rudolf E. Wilhelm 6867 Parkway Circle Dearborn Heights, MI 48127 | Name of Employer Self | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date—\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3040.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 1170
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

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|---|--|-----------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Ralph L. Boling P. O. Box 247 Hawesville, KY 42348 | | Information Requested | 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Information Requested | 100.00 |
| | | Aggregate Year-to-Date-\$ | 300.00 |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Albert Edward Fiorini 3004 Dunraven Court Louisville, KY 40222 | | Kentuckiana Trane Heating | 11-09-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Owner and Operator | 500.00 |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Daniel Hillenbrand 608 Edgewood Drive Batesville, IN 47006 | | Hillenbrand Industries | 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Executive | 500.00 |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mrs. I. Sophie duPont May 801 Smith's Bridge Road Wilmington, DE 19807 | | self | 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | homemaker | 500.00 |
| | | Aggregate Year-to-Date-\$ | 500.00 |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Richard A. Sanders Route 2 Smiths Grove, KY 42171 | | Edmonson County | 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | County Court Clerk | 30.00 |
| | | Aggregate Year-to-Date-\$ | 230.00 |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Ms. Geraldine B. Yenawine 1822 Tyler Parkway Louisville, KY 40204 | | Jefferson County Government | 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Office Manager | 987.00 |
| | | Aggregate Year-to-Date-\$ | 1113.00 |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. A. Kenneth Bunker 4809 Crofton Road Louisville, KY 40207 | | Touche Ross | 10-25-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Accountant | 1000.00 |
| | | Aggregate Year-to-Date-\$ | 1000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 3617.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 71(a)
(Use separate schedule(s) for each
category of the Detailed
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Ben B. Fowler
500 McClure Building

Frankfort, KY 40601

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

30.00

Occupation

Attorney

Aggregate Year-to-Date-\$

280.00

B. Full Name, Mailing Address and ZIP Code

Mr. Bruce H Hooper
Matsonford Road, Suite 400
Two Radnor Corp Center
Radnor, PA 19087

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hooper Bros. Co.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

1000.00

Occupation

Investments

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Mr. Richard J. Sennott
451 Chapel Hill Lane

Northfield, IL 33302
Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Ferguson Grain Co.

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

250.00

Occupation

Grain Merchant

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Herbert Caudill
402 Mt. View Road

Whitesburg, KY 41858
Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Caudill Lumber Co. Inc.

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

200.00

Occupation

President

Aggregate Year-to-Date-\$

400.00

E. Full Name, Mailing Address and ZIP Code

Mr. L. C. Fulenwider, Jr.
1125 17th Street, Suite 2500

Denver, CO 80202
Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

L. C. Fulenwider Co.

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

250.00

Occupation

COB

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Thomas M. Hunt
3408 Lovers Lane

Dallas, TX 75225
Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Hunt Petroleum Corp.

Date (month,
day, year)

11-19-84

Amount of Each
Receipt This Period

100.00

Occupation

Oil Man

Aggregate Year-to-Date-\$

300.00

G. Full Name, Mailing Address and ZIP Code

Mrs. Justine Milliken
627 Otis Boulevard
P. O. Box 3167
Spartanburg, SC 29304

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1000.00

SUBTOTAL of Receipts This Page (optional)

2830.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (a)
 (Use separate schedule(s) for each
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| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--|--|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Ms. Evelyn Simmons 1700 W. Wilshire Blvd. Oklahoma City, OK 73116 | Name of Employer Jenkins Drilling & Pumping | Date (month, day, year) 11-01-84 | Amount of Each Receipt this Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation office manager | Aggregate Year-to-Date—\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code Mrs. Jany M. Clanton Overbrook Road Mockingbird Valley Louisville, KY 40207 | Name of Employer self employed | Date (month, day, year) 11-08-84 | Amount of Each Receipt This Period 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date—\$ 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Dr. Hoyt D. Gardner, Sr. 2707 Lamont Road Louisville, KY 40205 | Name of Employer Self | Date (month, day, year) 11-05-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation M. D. | Aggregate Year-to-Date—\$ 300.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. Charles L. Jenkins 1700 West Wilshire Oklahoma City, OK 73116 | Name of Employer Jenkins Drilling & Pump Company | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date—\$ 250.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Sammy J. Spradlin 1420 Fairway Dr. Ashland, KY 41101 | Name of Employer Ashland Acoustical | Date (month, day, year) 11-05-84 | Amount of Each Receipt This Period 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. Gerard E. Copelli 705 Wolfsnare Crescent Virginia Beach, VA 23454 | Name of Employer Am. Ocean Cont. Corp. | Date (month, day, year) 10-19-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date—\$ 280.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Norman G. Germany P. O. Box 12266 Dallas, TX 75225 | Name of Employer E. B. Germany & Sons | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | Aggregate Year-to-Date—\$ 350.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1550.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 56 of 73 for
 LINE NUMBER 11 (2)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|----------------------------------|---------------------------|------------------------------------|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Morton Kasdan 600 Col. Anderson Pkwy. Louisville, KY 40222 | Morton L. Kasdan, M.D., F.A.C.S. | 10-29-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Doctor | Aggregate Year-to-Date-\$ | |
| | | 400.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Sarah A. Stevens 346 Jesselin Drive Lexington, KY 40503 | | 11-14-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Homemaker | Aggregate Year-to-Date-\$ | |
| | | 230.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Philip B Crosby PO Box 2369 Winter Park, FL 32790 | Philip Crosby Assoc | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Miss Marcella L. Glanz 2482 Bardstown Road Louisville, KY 40205 | Glanz Plbg. and Htg. Inc. | 10-29-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | |
| | | 280.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Wesley R Kewish 16 San Sebastian, Harbor Ridge Newport Beach, CA 92660 | Rata Corp | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Consultant | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Carl E. Patchin Clark Bldg, 115 South 6th Street Allison Park, PA 15101 | Royal Oil & Gas GCo. | 11-07-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | |
| | | 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. William Biggs Tabler, III 209 Blankenbaker Lane Louisville, KY 40207 | Times Mirror Cable TV | 10-19-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation V. President | Aggregate Year-to-Date-\$ | |
| | | 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1830.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 57 of 72 for
LINE NUMBER 11-12
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

| Any Information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--|---|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mrs. Ruth Dewey Route 1, Sledd Creek Gilbertsville, KY 42044 | Name of Employer none | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date--\$ 530.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. James S. Greene, Jr. Box 995 Harlan, KY 40831 | Name of Employer self | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation attorney | Aggregate Year-to-Date--\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Ms. Anna Knoop 725 F St. Marysville, CA 95901 | Name of Employer Investments | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Self employed | Aggregate Year-to-Date--\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Mrs. O. S. Petty 101 East Kings Highway San Antonio, TX 78212 | Name of Employer self | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date--\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code Ms. Anna B. Toole 725 Center St. Central City, KY 42330 | Name of Employer none | Date (month, day, year) 10-24-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation none | Aggregate Year-to-Date--\$ 400.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. William E. Anderson, II 2579 Edgemoor Drive Lexington, KY 40510 | Name of Employer Information Requested | Date (month, day, year) 10-19-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date--\$ 500.00 | |
| G. Full Name, Mailing Address and ZIP Code Dr. M. A. Douglass, Jr. P. O. Box 57 Magnolia, KY 42757 | Name of Employer self | Date (month, day, year) 11-15-84 | Amount of Each Receipt This Period 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation physician | Aggregate Year-to-Date--\$ 230.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1800.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 1112
 (Use separate schedule for each category of receipts detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Henry S. Hall, Jr.
 154 Coolridge Hill

Cambridge, MA 02138

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

250.00

Occupation

retired

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. John M. Lang
 P. O. Box 764
 208 South Broad Street
 London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

attorney

Aggregate Year-to-Date-\$

600.00

C. Full Name, Mailing Address and ZIP Code

Mr. James E. Rarick
 19 South Country Lane

Village of Golf, FL 33436

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

None

Date (month,
 day, year)

10-19-84

Amount of Each
 Receipt This Period

500.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Harold R. Tyler, Jr.
 30 Rockefeller Plaza, Suite 36

New York, NY 10020

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

11-13-84

Amount of Each
 Receipt This Period

250.00

Occupation

lawyer

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Miles A. Bailey, Jr.
 9804 Reynolda Road

Louisville, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

La-Z-Boy Showcase Shoppe

Date (month,
 day, year)

11-09-84

Amount of Each
 Receipt This Period

50.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Michael S. Egan
 2000 E. Oakland Park Blvd.

Fort Lauderdale, FL 33339

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dkbert Associates

Date (month,
 day, year)

11-07-84

Amount of Each
 Receipt This Period

250.00

Occupation

Partner

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. F. W. Harrison
 P. O. Box 51943

Lafayette, LA 70505

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Self

Date (month,
 day, year)

10-22-84

Amount of Each
 Receipt This Period

250.00

Occupation

Geologist

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 52 of 72
LINE NUMBER 11 (25)
(Use separate schedules for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Willard W. Lindsey
110 Pike Avenue

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

10-22-84

Amount of Each Receipt This Period

50.00

Occupation

Oil Gas Developer and Operator

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Lucian A. Rice
504a Hillcrest Drive

Goldsboro, NC 27530

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Rouse & Co.

Date (month, day, year)

11-01-84

Amount of Each Receipt This Period

250.00

Occupation

Project Superintendent

Aggregate Year-to-Date-\$

250.00

C. Full Name, Mailing Address and ZIP Code

Mr. Kenneth G. Walker
302 Pine Avenue

Long Beach, CA 90812

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

10-31-84

Amount of Each Receipt This Period

250.00

Occupation

rancher

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Ms. Ruth Ann Barry
6785 Winton Road

Cincinnati, OH 45224

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Good Samaritan Hospital

Date (month, day, year)

11-05-84

Amount of Each Receipt This Period

1000.00

Occupation

Registered Nurse

Aggregate Year-to-Date-\$

1000.00

E. Full Name, Mailing Address and ZIP Code

Mr. W. S. Farish
P. O. Box 626

Versailles, KY 40383

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month, day, year)

11-02-84

Amount of Each Receipt This Period

1000.00

Occupation

Lane's End Farm

Aggregate Year-to-Date-\$

2000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Arthur R. Heckerman
2300 Central Trust Center

Ft. Thomas, KY 41075

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Heckerman and Hood

Date (month, day, year)

10-30-84

Amount of Each Receipt This Period

300.00

Occupation

Attorney

Aggregate Year-to-Date-\$

300.00

G. Full Name, Mailing Address and ZIP Code

Mr. Thomas Allen Lupton, Jr.
1201 Tallan Bldg.

Chattanooga, TN 37401

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Stone Fort Land Co.

Date (month, day, year)

10-22-84

Amount of Each Receipt This Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11-24
(Use separate schedule for each
category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|-------------------------------------|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. G. Hunt Rounsavall 5405 Pueblo Road Louisville, KY 40207 | Dixie Warehouse | 10-30-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Executive | Aggregate Year-to-Date-\$ | 275.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. George Willett P. O. Box 792 Huron, CA 93234 | Information Requested | 11-01-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 250.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Ralph L. Boling P. O. Box 247 Hawesville, KY 42348 | Information Requested | 11-21-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ | 300.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Curtis J. Flanagan P. O. Box 14186 Fort Lauderdale, FL 33302 | So. FL Path. Society | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Pathologist | Aggregate Year-to-Date-\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Kurt Hillgruber PO Box 1190 Santa Monica, CA 90406 | Hillgruber Investment | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner | Aggregate Year-to-Date-\$ | 250.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Morris McBride P. O. Box 1134 Paducah, KY 42001 | self | 11-15-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation realtor | Aggregate Year-to-Date-\$ | 210.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Richard A. Sanders Route 2 Smiths Grove, KY 42171 | Edmonson County | 11-01-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation County Court Clerk | Aggregate Year-to-Date-\$ | 230.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 1030.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
(Use separate schedule(s) for each
category of the Detailed
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Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Ms. Geraldine B. Yenawine
1822 Tyler Parkway

Louisville, KY 40204

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Jefferson County Government

Date (month,
day, year)

11-01-84

Amount of Each
Receipt this Period

13.00

Occupation

Office Manager

Aggregate Year-to-Date-\$

1113.00

B. Full Name, Mailing Address and ZIP Code

Mr. Hibbard Burke, Jr.
Route 2, Box 362F

Jenkins, KY 41537

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-30-84

Amount of Each
Receipt This Period

100.00

Occupation

retired

Aggregate Year-to-Date-\$

285.00

C. Full Name, Mailing Address and ZIP Code

Mr. J A Fowler, Jr.
5 Huyler Road

East Setauket, NY 11733

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Retired

Aggregate Year-to-Date-\$

250.00

D. Full Name, Mailing Address and ZIP Code

Mr. Robert B. Horner
4001 Glenarm Road

Crestwood, KY 40014

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

300.00

Occupation

farmer

Aggregate Year-to-Date-\$

700.00

E. Full Name, Mailing Address and ZIP Code

Mr. Wilson D. McRae
P. O. Box 907

Marianna, FL 32446

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

retired

Aggregate Year-to-Date-\$

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. E. L. Shannon, Jr.
1000 S. Fremont Avenue

Alhambra, CA 91802

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-07-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. Herbert Caudill
402 Mt. View Road

Whitesburg, KY 41858

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Caudill Lumber Co., Inc.

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

100.00

Occupation

President

Aggregate Year-to-Date-\$

400.00

SUBTOTAL of Receipts This Page (optional)

1513.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 LINE NUMBER 11 (A)
 (Use separate schedule for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Thomas Fuller
 3018 Springcrest Drive

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Thomas Industries

Occupation

President

Aggregate Year-to-Date-\$

Date (month, day, year)

10-19-84

Amount of Each Receipt This Period

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. Frederick Hurd
 200 East 66th Street

New York, NY 10021

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$

Date (month, day, year)

10-24-84

Amount of Each Receipt This Period

250.00

C. Full Name, Mailing Address and ZIP Code

Dr. Lawrence T. Minish, Jr.
 6 River Hill Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

M.D. Retired

Aggregate Year-to-Date-\$

Date (month, day, year)

10-29-84

Amount of Each Receipt This Period

100.00

D. Full Name, Mailing Address and ZIP Code

Mr. John W. Simmons
 384 Meadow Grove

Flintridge, CA 91011

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month, day, year)

11-07-84

Amount of Each Receipt This Period

500.00

E. Full Name, Mailing Address and ZIP Code

Mr. Sherman E. Clark
 P.O. Box 268

London, KY 40741

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Information Requested

Occupation

Information Requested

Aggregate Year-to-Date-\$

Date (month, day, year)

10-19-84

Amount of Each Receipt This Period

500.00

F. Full Name, Mailing Address and ZIP Code

Mr. Jacob V. Garner
 Route 3, Box 488

Somerset, KY 42501

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

none

Occupation

retired

Aggregate Year-to-Date-\$

Date (month, day, year)

10-24-84

Amount of Each Receipt This Period

1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Louis J. Jenn
 8900 Keystone Crossing #401

Indianapolis, IN 46240

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Atrium Structures, Inc.

Occupation

Executive

Aggregate Year-to-Date-\$

Date (month, day, year)

10-22-84

Amount of Each Receipt This Period

250.00

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 63 of 72 for
LINE NUMBER 11
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category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. Sammy J. Spradlin
1420 Fairway Dr.**

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Ashland Acoustical

Date (month,
day, year)

11-16-84

Amount of Each
Receipt this Period

50.00

Occupation
President

Aggregate Year-to-Date-\$ **250.00**

B. Full Name, Mailing Address and ZIP Code

**Mr. Gerard E. Copelli
705 Wolfsnare Crescent**

Virginia Beach, VA 23454

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Am. Ocean Cont. Corp.

Date (month,
day, year)

11-16-84

Amount of Each
Receipt This Period

30.00

Occupation
President

Aggregate Year-to-Date-\$ **280.00**

C. Full Name, Mailing Address and ZIP Code

**Mr. Eldridge T. Gerry
59 Wall Street**

New York, NY 10005

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation
Information Requested

Aggregate Year-to-Date-\$ **1000.00**

D. Full Name, Mailing Address and ZIP Code

**Mr. Thomas N Kearns
850 Pembroke Road**

Hollywood, FL 33021

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Meekins, Inc.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

500.00

Occupation
President

Aggregate Year-to-Date-\$ **500.00**

E. Full Name, Mailing Address and ZIP Code

**Mr. B.D. Newman
P.O. Box 2444**

Newport News, VA 23602

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Newman AMC Jeep/Renault

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

250.00

Occupation
President

Aggregate Year-to-Date-\$ **250.00**

F. Full Name, Mailing Address and ZIP Code

**Mr. C. Hobart Stevenson
4103 Calle Abril**

San Clemente, CA 92672

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation
retired

Aggregate Year-to-Date-\$ **250.00**

G. Full Name, Mailing Address and ZIP Code

**Mr. Walden Cuddy
Box 168**

Millstone, KY 41838

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

grocery store

Date (month,
day, year)

11-15-84

Amount of Each
Receipt This Period

30.00

Occupation
owner

Aggregate Year-to-Date-\$ **280.00**

SUBTOTAL of Receipts This Page (optional)

2110.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS

Page 64 of 72 for
 LINE NUMBER 11 (a)
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 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--|---------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Donald G. Glascoff, Jr. 1 Wall Street New York, NY 10005 | | Information Requested | 10-22-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Information Requested | 250.00 |
| | | Aggregate Year-to-Date—\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. George A. Kiehn 2011 W. Lincoln Road Stockton, CA 95207 | | Keen Graphics | 10-31-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Partner | 250.00 |
| | | Aggregate Year-to-Date—\$ | 250.00 |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. Dennis R. Patrick Route 4 Box 890 Williamsburg, KY 40769 | | Whitley County | 11-01-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | County Circuit Clerk | 500.00 |
| | | Aggregate Year-to-Date—\$ | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. William Biggs Tabler, III 209 Blankenbaker Lane Louisville, KY 40207 | | Times Mirror Cable TV | 11-14-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | V. President | 100.00 |
| | | Aggregate Year-to-Date—\$ | 250.00 |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mrs. Ruth Dewey Route 1, Sledd Creek Gilbertsville, KY 42044 | | none | 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | homemaker | 100.00 |
| | | Aggregate Year-to-Date—\$ | 530.00 |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Mr. John S. Greenebaum 2233 Douglass Blvd. Louisville, KY 40205 | | Self-employed | 11-08-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Attorney | 1000.00 |
| | | Aggregate Year-to-Date—\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| J Komes 2006 Washington St San Francisco, CA 94109 | | Self-Employed | 10-29-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Consultant | 250.00 |
| | | Aggregate Year-to-Date—\$ | 250.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2450.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mr. O. S. Petty
101 Zast Kings Highway**

San Antonio, TX 78212

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code

**Ms. Anna B. Toole
725 Center St.**

Central City, KY 42330

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

100.00

Occupation

none

Aggregate Year-to-Date-\$

400.00

C. Full Name, Mailing Address and ZIP Code

**Mr. Paul E. Arneson
1101 Connecticut Avenue, NW**

Washington, DC 20036

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Williams & Jensen

Date (month,
day, year)

11-07-84

Amount of Each
Receipt This Period

500.00

Occupation

Lawyer

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

**Ms. Mary E. Dudla
34 Werner Road**

Clifton Park, NY 12065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

NE Professional Services

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

2000.00

Occupation

RN

Aggregate Year-to-Date-\$

2000.00

E. Full Name, Mailing Address and ZIP Code

**Mrs. Judy Hall
618 Hatherleigh Lane**

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

2000.00

F. Full Name, Mailing Address and ZIP Code

**Mr. Oliver Langenberg
1 North Jefferson**

Saint Louis, MO 63103

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

250.00

Occupation

Stockbroker

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

**Mr. William J. Receveur, III
27 Stone Bridge**

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Garst-Receveur

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

500.00

Occupation

Construction Ex.

Aggregate Year-to-Date-\$

500.00

SUBTOTAL of Receipts This Page (optional)

4850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11(a)
(Use separate schedule(s) for each
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Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. Richard M. Baker
2534 Rocky Ridge Road

Birmingham, AL 35243

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Residential Land Inc.

Date (month,
day, year)

10-19-84

Amount of Each
Receipt this Period

500.00

Occupation

President

Aggregate Year-to-Date-\$

500.00

B. Full Name, Mailing Address and ZIP Code

Mr. W. E. Eison
45 Salisbury

Madisonville, KY 42431

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Western KY Energy Equip

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

200.00

Occupation

salesman

Aggregate Year-to-Date-\$

400.00

C. Full Name, Mailing Address and ZIP Code

Mr. George L. Hart
Rural Route Box 171

Eddyville, KY 42038

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-05-84

Amount of Each
Receipt This Period

50.00

Occupation

Retired

Aggregate Year-to-Date-\$

500.00

D. Full Name, Mailing Address and ZIP Code

Mr. Willard W. Lindsey
110 Pike Avenue

Pikeville, KY 41501

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-30-84

Amount of Each
Receipt This Period

50.00

Occupation

Oil Gas Developer and Operator

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. Edwin W. Rickert
56 Dogwood Lane

Rockville Centre, NY 11570

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Brundage, Story, & Rose

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Sr. Investment Consultant

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. Nicholas B. Wallace
616 Fifth

Fort Lauderdale, FL 33304

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

ESM Group Inc.

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

250.00

Occupation

Executive

Aggregate Year-to-Date-\$

250.00

G. Full Name, Mailing Address and ZIP Code

Mr. David E. Bartley
7611 Greenlawn Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General

☐ Other (specify):

Name of Employer

Coopers & Lybrand CPA's

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

30.00

Occupation

CPA

Aggregate Year-to-Date-\$

230.00

SUBTOTAL of Receipts This Page (optional)

1330.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 13 (a)
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mr. James E. Farmer
5128 Bardstown Road

Louisville, KY 40291

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self employed

Date (month,
day, year)

11-05-84

Amount of Each
Receipt this Period

30.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 205.00

B. Full Name, Mailing Address and ZIP Code

Mrs. Mary Kay Hemmer
8906 Cromwell Hill Road

Louisville, KY 40222

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

100.00

Occupation

Homemaker

Aggregate Year-to-Date-\$ 300.00

C. Full Name, Mailing Address and ZIP Code

Mr. Gerald E. Lyons
618 - 15th Street

Ashland, KY 41101

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-24-84

Amount of Each
Receipt This Period

250.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 250.00

D. Full Name, Mailing Address and ZIP Code

Mr. G. Hunt Rounsavall
5405 Pueblo Road

Louisville, KY 40207

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Dixie Warehouse

Date (month,
day, year)

11-09-84

Amount of Each
Receipt This Period

200.00

Occupation

Executive

Aggregate Year-to-Date-\$ 275.00

E. Full Name, Mailing Address and ZIP Code

Ms. Mamie L. Williams
1503 Quincy Street

Topeka, KS 66612

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$ 1000.00

F. Full Name, Mailing Address and ZIP Code

Mr. Henry S. Booth
700 Cranbrook Road

Bloomfield Hills, MI 48013

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

retired

Aggregate Year-to-Date-\$ 1000.00

G. Full Name, Mailing Address and ZIP Code

Mr. S Douglas Fleet
1011 E Main St., Room 211

Richmond, VA 23219

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

BFS Co.

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Partner

Aggregate Year-to-Date-\$ 250.00

SUBTOTAL of Receipts This Page (optional)

2830.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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 (Use separate schedule for each category of the Detailed Summary Page)

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|---|--------------------------------|---------------------------|------------------------------------|
| Name of Committee (in full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. John P. Himes 708 Third Avenue #3505 New York, NY 10017 | none | 10-31-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ | 250.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Henry F. McCamish, Jr. Tower Place - Suite 2900 3340 Peachtree Road N.W. Atlanta, GA 30026 | Management Comp. Group SE Inc. | 10-19-84 | 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Chairman | Aggregate Year-to-Date-\$ | 300.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. E. J. Sansome waiting Mike get correct address, KY 40000 | self | 11-01-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ | 1000.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Lloyd G. Yopp 517 Briar Hill Road Louisville, KY 40206 | self | 10-25-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation M.D. | Aggregate Year-to-Date-\$ | 300.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Paul Burnam W. Main Street Richmond, KY 40475 | self | 10-26-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | Aggregate Year-to-Date-\$ | 300.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Newell Fox 8800 Denington Drive Louisville, KY 40222 | Burger King Franchise | 10-26-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Restaurantier | Aggregate Year-to-Date-\$ | 1000.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. W. James Host c/o Host & Associates 120 Kentucky Ave. Lexington, KY 40502 | Host Communications, Inc. | 11-07-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ | 1500.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 2650.00 |
| TOTAL This Period (list page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 11 (a)
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category of the Detailed
Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Ernest Meade 1001 Winchester Ave. Ashland, KY 41101 | Name of Employer Hertz System Leasing-Self | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Auto Rental | Aggregate Year-to-Date-\$ 230.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Bayard Sharp Box 3779 Greenville, DE 19807 | Name of Employer Information Requested | Date (month, day, year) 11-02-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Mr. Howard E. Chappell P. O. Box 746 Hazard, KY 41701 | Name of Employer Hazard Express, Inc. | Date (month, day, year) 10-26-84 | Amount of Each Receipt This Period 900.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Owner/Trucking Company | Aggregate Year-to-Date-\$ 1200.00 | |
| D. Full Name, Mailing Address and ZIP Code Mr. Ottis H. Fultz Carter, KY 41128 | Name of Employer Information Requested | Date (month, day, year) 10-30-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 325.00 | |
| E. Full Name, Mailing Address and ZIP Code Mrs. Martha W Hurd 115 Lexford Road Piedmont, CA 94611 | Name of Employer self | Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Housewife | Aggregate Year-to-Date-\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Dr. Lawrence T. Minish, Jr. 6 River Hill Road Louisville, KY 40207 | Name of Employer none | Date (month, day, year) 11-13-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation M.D. Retired | Aggregate Year-to-Date-\$ 400.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. A. M. Simon 485 Park Avenue New York, NY 10022 | Name of Employer Information Requested | Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date-\$ 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2900.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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|---|----------------------------------|----------------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Dorothy N. Clay 139 Sagamore Road Louisville, KY 40207 | none | 10-23-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Retired | Aggregate Year-to-Date-\$ 250.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Horace Garrett 715 Edwards Blvd. Big Spring, TX 79730 | self | 11-07-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation homemaker | Aggregate Year-to-Date-\$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Harold C. Jennings 14835 Hagar Street Mission Hills, CA 91345 | none | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles E. Mullen Route 11, 160 Jessamine Paducah, KY 42001 | Chuck Mullen Olds Inc. | 10-23-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Car dealer | Aggregate Year-to-Date-\$ 500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mrs. Mildred Stanhagen 1261 East Edgemont Phoenix, AZ 85006 | none | 10-24-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date-\$ 550.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Robert W. Corcoran Box 186 Danville, KY 40422 | Ag. Sales & Service | 11-05-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation partner | Aggregate Year-to-Date-\$ 300.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. George W. Gibson 36 Washington Street Wellesley, MA 02181 | Deland, Gibson, Meade & Gale, I. | 10-22-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation President | Aggregate Year-to-Date-\$ 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1700.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

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LINE NUMBER 1111
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Mrs. Charlean Keller
1806 S. Mariposa

Billings, MT 59102

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Kellerentp.

Date (month,
day, year)

10-22-84

Amount of Each
Receipt this Period

250.00

Occupation

President

Aggregate Year-to-Date-\$

250.00

B. Full Name, Mailing Address and ZIP Code

Mr. J. Larry Nichols
1500 Mid America Tower

Oklahoma City, OK 73102

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

11-01-84

Amount of Each
Receipt This Period

1000.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1000.00

C. Full Name, Mailing Address and ZIP Code

Ms. Mary T. Stewart
P.O. Box 2215

Palm Beach, FL 33480

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

300.00

Occupation

Housewife

Aggregate Year-to-Date-\$

300.00

D. Full Name, Mailing Address and ZIP Code

Ms. Marlene K Glasscock
6603 Lovington

Dallas, TX 75252

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

250.00

Occupation

Housewife

Aggregate Year-to-Date-\$

250.00

E. Full Name, Mailing Address and ZIP Code

Mr. J. R. Kiely
206 Manzanita Way

Redwood City, CA 94062

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Bechtel Power Corp.

Date (month,
day, year)

11-07-84

Amount of Each
Receipt This Period

250.00

Occupation

Consultant

Aggregate Year-to-Date-\$

250.00

F. Full Name, Mailing Address and ZIP Code

Mr. James A. Patterson, II
10000 Shelbyville Road, Ste 100

Anchorage, KY 40223

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

1000.00

Occupation

businessman

Aggregate Year-to-Date-\$

2000.00

G. Full Name, Mailing Address and ZIP Code

Mr. Roger F. Tarter
P.O. Box 10

Dunnville, KY 42528

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
day, year)

10-22-84

Amount of Each
Receipt This Period

900.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

1050.00

SUBTOTAL of Receipts This Page (optional)

3950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 72 of 78 for
 LINE NUMBER 11 (A)
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

**Mrs. Ruth Dewey
 Route 1, Sledd Creek**

Gilbertsville, KY 42044

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

none

Date (month,
 day, year)

10-29-84

Amount of Each
 Receipt This Period

100.00

Occupation

homemaker

Aggregate Year-to-Date-\$

530.00

B. Full Name, Mailing Address and ZIP Code

**Mr. Elmo Greer
 P.O. Box 730**

London, KY 40741

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Corbin Deposit Bank

Date (month,
 day, year)

11-05-84

Amount of Each
 Receipt This Period

75.00

Occupation

banker

Aggregate Year-to-Date-\$

325.00

C. Full Name, Mailing Address and ZIP Code

**Mrs. Sarah Korein
 240 Central Park S.**

New York, NY 10003

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

11-01-84

Amount of Each
 Receipt This Period

1000.00

Occupation

homemaker

Aggregate Year-to-Date-\$

1100.00

D. Full Name, Mailing Address and ZIP Code

**Mr. Fred Pfeiffer, Jr.
 740 Zorn Avenue, #2J**

Louisville, KY 40206

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Information Requested

Date (month,
 day, year)

11-14-84

Amount of Each
 Receipt This Period

200.00

Occupation

Information Requested

Aggregate Year-to-Date-\$

300.00

E. Full Name, Mailing Address and ZIP Code

**Ms. Elizabeth T. Trader
 P. O. Box 276**

Providence, KY 42450

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

self

Date (month,
 day, year)

11-13-84

Amount of Each
 Receipt This Period

100.00

Occupation

Independent Investor

Aggregate Year-to-Date-\$

220.00

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date-\$

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

1475.00

TOTAL This Period (last page this line number only)

178591.60

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 11-13
(Use separate schedule for each
category of the Detailed
Summary Page)

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|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee A. Full Name, Mailing Address and ZIP Code Henry Co. GOP c/o Frank E. Doll, Treasurer Carrollton Road Campbellburg, KY 40011 | | Name of Employer Date (month, day, year) 10-29-84 | Amount of Each Receipt this Period 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 30.00 | |
| B. Full Name, Mailing Address and ZIP Code Rowan County Rep. Committee Route 5, Box 185-1 Morehead, KY 40351 | | Name of Employer Date (month, day, year) 10-23-84 | Amount of Each Receipt This Period 151.90 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 151.90 | |
| C. Full Name, Mailing Address and ZIP Code Webster Co. Rep. Womens Club c/o Helen Fryer, Sec. Treasurer Route 1 Clay, KY 42404 | | Name of Employer Date (month, day, year) 10-22-84 | Amount of Each Receipt This Period 20.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 20.00 | |
| D. Full Name, Mailing Address and ZIP Code Oldham CO. Rep. Women's Club c/o Mrs. Donald Rice 1500 Halls Hill Road Crestwood, KY 40014 | | Name of Employer Date (month, day, year) 11-02-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 200.00 | |
| E. Full Name, Mailing Address and ZIP Code Suburban Women's Republican Club c/o Republican Headquarters 3rd and Chestnut Streets Louisville, KY 40202 | | Name of Employer Date (month, day, year) 10-23-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 100.00 | |
| F. Full Name, Mailing Address and ZIP Code Morgan Co. Republican Club C/O Donald C. Burton, Treasurer 460 Riverside West Liberty, KY 41472 | | Name of Employer Date (month, day, year) 11-01-84 | Amount of Each Receipt This Period 244.20 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 244.20 | |
| G. Full Name, Mailing Address and ZIP Code Cumberland Co. Rep. Organization C/O Lanny Judd, Treasurer Burkesville, KY 42717 | | Name of Employer Date (month, day, year) 10-22-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1646.10 |
| TOTAL This Period (last page this line number only) | | | 1646.10 |

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 5 for
 LINE NUMBER 11 (c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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|---|----------------------------------|--------------------------------|---|
| Name of Committee (In Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Trammell Crow Partners-PAC C/O J. McDonald Williams 3500 LTV Ct. 2001 Ross Avenue Dallas, TX 75201 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | | 11-01-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 500.00 | |
| B. Full Name, Mailing Address and ZIP Code House Political Action Committee 2700 Snaders Road Prospect Heights, IL 60070 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 10-29-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| C. Full Name, Mailing Address and ZIP Code Trans National Employees PAC c/o Jim Wells, Treasurer 1254 Industry Road Lexington, KY 40505 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 10-26-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 100.00 | |
| D. Full Name, Mailing Address and ZIP Code MESA PAC c/o Boone Pickens, Jr. P. O. Box 15007 Amarillo, TX 79105 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 10-29-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Fund for a Conservative Majority c/o Robert Heckman, Chairman 302 Fifth Street, NE. Washington, DC 20002 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 11-05-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 3526.96 | |
| F. Full Name, Mailing Address and ZIP Code Trans Technology 123 North Pitt Street Alexandria, VA 22314 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 10-19-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| G. Full Name, Mailing Address and ZIP Code Meridian Bancorp, Inc. PAC C/O Clair A. Snyder, Chairman P. O. Box 1102 Reading, PA 19603 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | 10-22-84 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 200.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 3300.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 5 for
LINE NUMBER 11-07-84
(Use separate schedule for each
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Summary Page)

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|---|--|---|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee A. Full Name, Mailing Address and ZIP Code Fund for a Conservative Majority c/o Robert Heckman, Chairman 302 Fifth Street, NE. Washington, DC 20002 | | Name of Employer Date (month, day, year) 11-07-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 3526.96 | |
| B. Full Name, Mailing Address and ZIP Code Nat. Screw Mach. Prod. Assn. PAC 6700 W. Snowville Road Brecksville, OH 44141 | | Name of Employer Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code Kimberly-Clark Good Government Committee Neenah, WI 54956 | | Name of Employer Date (month, day, year) 10-29-84 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 500.00 | |
| D. Full Name, Mailing Address and ZIP Code National Conservative PAC c/o Brad Zerbe, Political Dir. 1001 Prince Street Alexandria, VA 22314 | | Name of Employer Date (month, day, year) 11-07-84 | Amount of Each Receipt This Period 2628.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 2628.00 | |
| E. Full Name, Mailing Address and ZIP Code LENPAC c/o Mr. Burt Kennan, Chairman P. O. Box 6276 Metairie, LA 70009 | | Name of Employer Date (month, day, year) 10-31-84 | Amount of Each Receipt This Period 5000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 5000.00 | |
| F. Full Name, Mailing Address and ZIP Code True Responsible Government Com. c/o C. H. Breed, Chairman P. O. Box Drawer 2360 Casper, WY 82602 | | Name of Employer Date (month, day, year) 10-22-84 | Amount of Each Receipt This Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 100.00 | |
| G. Full Name, Mailing Address and ZIP Code Forest Political Action Comm. C/O W. Jeffrey Buford, Chairman 1500 Col. Nat. Bldg. 950-17th St Denver, CO 80202 | | Name of Employer Date (month, day, year) 10-18-84 | Amount of Each Receipt This Period 750.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date—\$ 750.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 10978.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 5 for
 LINE NUMBER 11-11
 (Use separate schedule for each
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Name of Committee (In Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Congressional Majority Committee
 2030 N. 16th Street, Suite 305

Arlington, VA 22201

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-31-84

Amount of Each
Receipt This Period

200.00

B. Full Name, Mailing Address and ZIP Code

Rep. Congressional Boosters Club
 c/o Ms. Beebe Bourne
 300 First Street, S. E.
 Washington, DC 20003

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month,
day, year)

11-13-84

Amount of Each
Receipt This Period

2000.00

C. Full Name, Mailing Address and ZIP Code

Cooper Laboratories, Inc. PAC
 c/o Parker Montgomery, Chairman
 1901 Ave. of the Stars, Ste. 1422
 Los Angeles, CA 90067

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

1000.00

D. Full Name, Mailing Address and ZIP Code

Sun PAC
 C/O David Twomey, Adm. Director
 1100 Matsonford Road
 Radnor, PA 19087

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-19-84

Amount of Each
Receipt This Period

500.00

E. Full Name, Mailing Address and ZIP Code

Auto Dealers and Drivers For
 Free Trade Political Action Com.
 153-12 Hillside Avenue
 Jamaica, NY 11435

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month,
day, year)

11-19-84

Amount of Each
Receipt This Period

2500.00

F. Full Name, Mailing Address and ZIP Code

Revere Copper & Brass Employ. PAC
 c/o Mr. John Wherry
 P. O. Box 218
 Shelbyville, KY 40065

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-25-84

Amount of Each
Receipt This Period

650.00

G. Full Name, Mailing Address and ZIP Code

Blue Bell Employees' PAC
 c/o David Prince
 P. O. Box 21488
 Greensboro, NC 27420

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date-\$

Date (month,
day, year)

10-29-84

Amount of Each
Receipt This Period

1000.00

SUBTOTAL of Receipts This Page (optional)

7850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 5 for
LINE NUMBER 1120
(Use separate schedule(s) for each
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Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Figgle International Employees
Better Government Committee
1000 Virginia Center Parkway
Richmond, VA 23295

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-25-84

300.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 800.00

B. Full Name, Mailing Address and ZIP Code

McGraw-Edison Company PAC
c/o Nancy H. Yde, Treasurer
1 Continental Tow. 1701 Golf Rd.
Rolling Meadows, IL 60008

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-22-84

1000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1500.00

C. Full Name, Mailing Address and ZIP Code

Coopers & Lybrand PAC
1800 M. Street, NW

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-01-84

83.33

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 83.33

D. Full Name, Mailing Address and ZIP Code

Sun PAC
C/O David Twomey, Adm. Director
100 Matsonford Road
Radnor, PA 19087

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-29-84

1500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 3000.00

E. Full Name, Mailing Address and ZIP Code

McGraw-Edison Company PAC
c/o Nancy H. Yde, Treasurer
1 Continental Tow. 1701 Golf Rd.
Rolling Meadows, IL 60008

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-01-84

500.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 1500.00

F. Full Name, Mailing Address and ZIP Code

New Leadership Fund
C/ O. Glenn S. Gertell, Chairman
P. O. Box 1890
Washington, DC 20013

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-23-84

100.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 100.00

G. Full Name, Mailing Address and ZIP Code

Motorola Emp. Good Govt. Fund
C/O Bruce Ladd, Director
1776 K Street, N. W.
Washington, DC 20006

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-25-84

2000.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 4000.00

SUBTOTAL of Receipts This Page (optional)

5483.33

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 5 for
 LINE NUMBER 11
 (Use separate schedule for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

UPSPAC
 C/O Samuel A. Lockwood
 51 Weaver St. Greenwich Of. Park 5
 Greenwich, CT 06830

Name of Employer

Occupation

Date (month,
 day, year)

11-02-84

Amount of Each
 Receipt this Period

2000.00

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date--\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date--\$

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

29611.33

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 1369
 (Use separate schedule for each
 category of this detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| | | | |
|--|--|---|---|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Judge A. Mitchell McConnell, Jr. 3 Gardiner Court Louisville, KY 40205 | | Name of Employer | Date (month, day, year) 10-26-84 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period 15000.00 |
| | | Aggregate Year-to-Date-\$ 40000.00 | |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer | Date (month, day, year) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation | Amount of Each Receipt This Period |
| | | Aggregate Year-to-Date-\$ | |
| SUBTOTAL of Receipts This Page (optional) | | | 15000.00 |
| TOTAL This Period (last page this line number only) | | | 15000.00 |

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 1 for
LINE NUMBER 13a
(Use separate schedules
for each numbered line)

| | | | |
|---|---|--|--|
| Name of Committee (in Full) McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code of Loan Source Mitch McConnell 3 Gardiner Court Louisville, Kentucky 40205 | Original Amount of Loan 15,000 | Cumulative Payment To Date 15,000 | Balance Outstanding at Close of This Period 0 |
| Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| Terms: Date Incurred <u>10-26-84</u> Date Due <u>None</u> Interest Rate <u>None % (apr)</u> <input type="checkbox"/> Secured | | | |
| List All Endorsers or Guarantors (if any) to Item A | | | |
| 1. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 2. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 3. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| B. Full Name, Mailing Address and ZIP Code of Loan Source | | | |
| Original Amount of Loan | | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured | | | |
| List All Endorsers or Guarantors (if any) to Item B | | | |
| 1. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 2. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 3. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| SUBTOTALS This Period This Page (optional) | | | |
| TOTALS This Period (last page in this line only) | | | |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | | | |

84020280964

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 14
 (Use separate schedule for each
 category of this Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| Name of Committee (in Full) | | | |
|--|-------------------------|----------------------------------|---|
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Ailes Communications, Inc. c/o Roger Ailes 456 W. 43rd Street New York, NY 10036 | | 11-02-84 | 6000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| | | 6000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| | | | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| | | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| | | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| | | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| | | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date—\$ | |
| | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 6000.00 |
| TOTAL This Period (last page this line number only) | | | 6000.00 |

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
LINE NUMBER 15
(Use separate schedule for each
category of the Detailed
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

NRSC
c/o Mitch Daniels, Exec. Dir.
404 C. Street, N.E.
Washington, DC 20002

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-07-84

13815.00

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date-\$ 13815.00

B. Full Name, Mailing Address and ZIP Code

Liberty National Bank
417 W. Jefferson Street
Louisville, KY 40202

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-2-84

167.57

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify): Interest

Aggregate Year-to-Date-\$ 12042.24

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date-\$

SUBTOTAL of Receipts This Page (optional)

13,982.57

TOTAL This Period (last page this line number only)

13,982.57

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 10 for
 LINE NUMBER 17
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291 | Contract Labor Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 128.98 |
| B. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt. 3 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-15-84 | 108.53 |
| C. Full Name, Mailing Address and ZIP Code Mr. Joseph G. Schiff 1708 Clayton Road Louisville, KY 40204 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-19-84 | 188.10 |
| D. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apt. 715 Louisville, KY 40218 | Purpose of Disbursement Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-25-84 | 131.72 |
| E. Full Name, Mailing Address and ZIP Code Mr. Jeff Swedenburg P. O. Box 512 SBTS Louisville, KY 40280 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-22-84 | 68.68 |
| F. Full Name, Mailing Address and ZIP Code Ms. Donna Cottrell 49 Place Janue Louisville, KY 40203 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 113.90 |
| G. Full Name, Mailing Address and ZIP Code Treasurer KY Unemployment Ins. Frankfort, KY 40621 | Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-31-84 | 350.15 |
| H. Full Name, Mailing Address and ZIP Code Ms. Susan Hill 2825 Lexington Road Louisville, Ky 40280 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-22-84 | \$117.25 |
| I. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-02-84 | 200.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 1407.31 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 2 of 16 for
LINE NUMBER 17
(Use separate schedules for each
category of the Detailed
Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|---|--|--|--|
| A. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 49.02 |
| B. Full Name, Mailing Address and ZIP Code WKYQ-FM/WKYX-AM P. O. Box 2397 Paducah, KY 42001 | Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 249.00 |
| C. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Avenue Louisville, KY 40204 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-30-84 | Amount of Each Disbursement This Period 1061.69 |
| D. Full Name, Mailing Address and ZIP Code Office Products Clearance Center P. O. Box 1679 Louisville, KY 40201 | Purpose of Disbursement Furniture rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-04-84 | Amount of Each Disbursement This Period 285.86 |
| E. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, In 46250 | Purpose of Disbursement Media Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-31-84 | Amount of Each Disbursement This Period 30097.00 |
| F. Full Name, Mailing Address and ZIP Code AT & T Information Systems 9300 Shelbyville Road Louisville, KY 40222 | Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-06-84 | Amount of Each Disbursement This Period 719.88 |
| G. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley Louisville, KY 40220 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-22-84 | Amount of Each Disbursement This Period 113.90 |
| H. Full Name, Mailing Address and ZIP Code Biomedical Communications Center Health Sciences Center University of Louisville Louisville, KY 40292 | Purpose of Disbursement Dubbing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-04-84 | Amount of Each Disbursement This Period 48.00 |
| I. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-30-84 | Amount of Each Disbursement This Period 459.61 |
| SUBTOTAL of Disbursements This Page (optional) | | | 33083.96 |
| TOTAL This Period (last page this line number only) | | | |

84020280768

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 3 of 16 for
 LINE NUMBER 17
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
McConnell Senate Committee

| | | | |
|---|--|---|--|
| A. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-30-84 | Amount of Each Disbursement This Period 103.20 |
| B. Full Name, Mailing Address and ZIP Code Mr. Jeff Swedenburg P. O. Box 512 SBTS Louisville, KY 40280 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 58.63 |
| C. Full Name, Mailing Address and ZIP Code Ms. Theresa Coble 2825 Lexington Road Louisville, KY 40280 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-22-84 | Amount of Each Disbursement This Period 82.08 |
| D. Full Name, Mailing Address and ZIP Code Treasurer KY Unemployment Ins. Frankfort, KY 40621 | Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-31-84 | Amount of Each Disbursement This Period 8.32 |
| E. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 37.61 |
| F. Full Name, Mailing Address and ZIP Code Ms. Susan Hill 2825 Lexington Road Louisville, KY 40280 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 117.25 |
| G. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-15-84 | Amount of Each Disbursement This Period 97.69 |
| H. Full Name, Mailing Address and ZIP Code WVLK-FM Box 1559 Lexington, KY 40592 | Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 360.40 |
| I. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Avenue Louisville, KY 40204 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-15-84 | Amount of Each Disbursement This Period 1061.69 |
| SUBTOTAL of Disbursements This Page (optional) | | | 1926.87 |
| TOTAL This Period (last page this line number only) | | | |

84020280969

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 16 for
 LINE NUMBER 17
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)
 McConnell Senate Committee

| | | | | |
|---|---|--|--|--|
| A. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Travel Reimbursement | Date (month, day, year) 10-22-84 | Amount of Each Disbursement This Period 287.19 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | Purpose of Disbursement Media | Date (month, day, year) 11/02/84 | Amount of Each Disbursement This Period 35665.63 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code A.B.C. Printing 3520 College Drive Louisville, KY 40299 | Purpose of Disbursement Printing | Date (month, day, year) 11/04/84 | Amount of Each Disbursement This Period 634.20 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code Mr. Paul Reid 107 Finley, #P-5 Louisville, KY 40220 | Purpose of Disbursement Contract Labor | Date (month, day, year) 11/3/84 | Amount of Each Disbursement This Period 93.80 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code Big Red Q Quick Print 3415 Bardstown Road Louisville, KY 40218 | Purpose of Disbursement Printing | Date (month, day, year) 11/4/84 | Amount of Each Disbursement This Period 85.04 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220 | Purpose of Disbursement Expense Reimbursement | Date (month, day, year) 11/4/84 | Amount of Each Disbursement This Period 43.26 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, #715 Louisville, KY 40218 | Purpose of Disbursement Travel Reimbursement | Date (month, day, year) 11/9/84 | Amount of Each Disbursement This Period 301.89 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| H. Full Name, Mailing Address and ZIP Code Mr. Mark Stambaugh 146 Grace Ct., #10 Covington, KY 41017 | Purpose of Disbursement Contract Labor | Date (month, day, year) 10/25/84 | Amount of Each Disbursement This Period 134.00 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| I. Full Name, Mailing Address and ZIP Code Ms. Theresa Coble 2825 Lexington Road Louisville, KY 40280 | Purpose of Disbursement Contract Labor | Date (month, day, year) 11/3/84 | Amount of Each Disbursement This Period 128.98 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 37373.99 | |
| TOTAL This Period (last page this line number only) | | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 5 of 16 for
LINE NUMBER 17
 (Use separate schedule(s) for each
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Name of Committee (in Full)
McConnell Senate Committee

| | | | |
|---|---|----------------------------|--|
| A. Full Name, Mailing Address and ZIP Code Federal Express Corporation P. O. Box 727, Dept. A Memphis, TN 38194 | Purpose of Disbursement Delivery Charges | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11/6/84 | 273.50 |
| B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11/15/84 | 50.00 |
| C. Full Name, Mailing Address and ZIP Code Liberty National Bank P. O. Box 32500 Louisville, KY 40232 | Purpose of Disbursement Checkbook Charge | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/22/84 | 14.75 |
| D. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Avenue Louisville, KY 40204 | Purpose of Disbursement Bonus | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11/19/84 | 10000.00 |
| E. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Contract Labor | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/30/84 | 42.49 |
| F. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | Purpose of Disbursement Media | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11/4/84 | 5900.00 |
| G. Full Name, Mailing Address and ZIP Code Ailes Communications, Inc. 456 West 43rd Street New York, NY 10036 | Purpose of Disbursement Media | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/22/84 | 16700.00 |
| H. Full Name, Mailing Address and ZIP Code Ms. Anita M. Rider 2700 Glenway Avenue Cincinnati, OH 45204 | Purpose of Disbursement Contract Labor | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/25/84 | 40.20 |
| I. Full Name, Mailing Address and ZIP Code Mr. Craig L. Brandts 2700 Glenway Avenue Cincinnati, OH 45204 | Purpose of Disbursement Contract Labor | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10/25/84 | 40.20 |
| SUBTOTAL of Disbursements This Page (optional) | | | 33061.14 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (In Full)
 McConnell Senate Committee

| | | | | |
|---|---|--|---|--|
| A. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Avenue Louisville, KY 40220 | Purpose of Disbursement Salary | Date (month, day, year) 11/15/84 | Amount of Each Disbursement This Period 459.61 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane, #715 Louisville, KY 40218 | Purpose of Disbursement Salary | Date (month, day, year) 11/9/84 | Amount of Each Disbursement This Period 103.20 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Todd Smith 2825 Lexington Rd., #3361 Louisville, KY 40280 | Purpose of Disbursement Contract Labor | Date (month, day, year) 10/22/84 | Amount of Each Disbursement This Period 115.58 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage | Date (month, day, year) 10/18/84 | Amount of Each Disbursement This Period 500.00 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code Ms. Peggy Fucella 131 Tanglewood Tr. Anchorage, KY 40223 | Purpose of Disbursement Salary | Date (month, day, year) 10/30/84 | Amount of Each Disbursement This Period 284.48 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code K.S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Purpose of Disbursement Airplane Rental | Date (month, day, year) 10/22/84 | Amount of Each Disbursement This Period 3873.00 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code WDNS-FM/WKCT-AM 804 College Bowling Green, KY 42101 | Purpose of Disbursement Radio Time | Date (month, day, year) 11/3/84 | Amount of Each Disbursement This Period 230.00 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| H. Full Name, Mailing Address and ZIP Code Liberty National Bank P. O. Box 32500 Louisville, KY 40232 | Purpose of Disbursement Payroll Taxes | Date (month, day, year) 10/30/84 | Amount of Each Disbursement This Period 96.45 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| I. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage | Date (month, day, year) 11/26/84 | Amount of Each Disbursement This Period 50.00 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 5712.32 | |
| TOTAL This Period (last page this line number only) | | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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LINE NUMBER 17
(Use separate Schedule(s) for each
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Summary Page)

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Name of Committee (In Full)

McConnell Senate Committee

| | | | | |
|--|---|--|---|--|
| A. Full Name, Mailing Address and ZIP Code WSEK-FM/WSFC-AM Box 740 Somerset, KY 42501 | Purpose of Disbursement Radio Time | Date (month, day, year) 11/3/84 | Amount of Each Disbursement This Period 374.50 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16, Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Contract Labor | Date (month, day, year) 10/31/84 | Amount of Each Disbursement This Period 127.15 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford Ct. #847 Louisville, KY 40291 | Purpose of Disbursement Salary | Date (month, day, year) 10/30/84 | Amount of Each Disbursement This Period 514.17 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code Ailes Communications, Inc. 456 West 43rd Street New York, NY 10036 | Purpose of Disbursement Media | Date (month, day, year) 10/25/84 | Amount of Each Disbursement This Period 7056.00 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code Mr. James A. Rankin R#1 Box 116 Warsaw, KY 41095 | Purpose of Disbursement Rent | Date (month, day, year) 11/3/84 | Amount of Each Disbursement This Period 350.00 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code Mr. Joel Broyles 2340 Harrodsburg Road Lexington, KY 40503 | Purpose of Disbursement Contract Labor | Date (month, day, year) 10/25/84 | Amount of Each Disbursement This Period 107.20 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, Ky 40220 | Purpose of Disbursement Expense Reimbursement | Date (month, day, year) 10-22-84 | Amount of Each Disbursement This Period 56.58 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| H. Full Name, Mailing Address and ZIP Code Copy Corp. 10420 Bluegrass Parkway Jeffersontown, KY 40299 | Purpose of Disbursement Office Supplies | Date (month, day, year) 11-06-84 | Amount of Each Disbursement This Period 90.72 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| I. Full Name, Mailing Address and ZIP Code Mr. Tod Smith Box 3361 Louisville, KY 40280 | Purpose of Disbursement Contract Labor | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 117.25 | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 8793.57 | |
| TOTAL This Period (last page this line number only) | | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| U. S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-18-84 | 500.00 |
| B. Full Name, Mailing Address and ZIP Code Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 200.75 |
| C. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-24-84 | 200.00 |
| D. Full Name, Mailing Address and ZIP Code Kentucky Press Service Inc. 332 Capitol Avenue Frankfort, KY 40601 | Purpose of Disbursement Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 89.90 |
| E. Full Name, Mailing Address and ZIP Code WLBj-AM&FM 689 Scott Lane Bowling Green, KY 42101 | Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 327.25 |
| F. Full Name, Mailing Address and ZIP Code Liberty National Bank P. O. Box 32500 Louisville, KY 40232 | Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-04-84 | 4045.89 |
| G. Full Name, Mailing Address and ZIP Code WLAP-AM&FM Box 11670 Lexington, KY 40577 | Purpose of Disbursement Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 1020.00 |
| H. Full Name, Mailing Address and ZIP Code Moseley Photography 140 N. Fourth Street Louisville, KY 40202 | Purpose of Disbursement Photography Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-04-84 | 64.00 |
| I. Full Name, Mailing Address and ZIP Code Mr. Bill Oakley Apt. 16 Vieux Carre Apts. Louisville, KY 40222 | Purpose of Disbursement Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-07-84 | 121.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 6568.69 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 LINE NUMBER 17
 (Use separate schedules for each
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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Ms. Sharon Pierce 5609 Oxford, Apt. 847 Louisville, KY 40291 | Expense Reimbursement | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-02-84 | 39.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ailes Communications Inc. 456 West 43rd Street New York, NY 10036 | Media | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-30-84 | 33,337.30 9632.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Salary | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-30-84 | 1127.70 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| The Copy Shop 1941 Bishop Lane Suite 106 Louisville, Ky 40218 | Printing | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 88.45 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Datapoint Corporation P. O. Box 93192 Chicago, IL 60673 | Computer Lease | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-06-84 | 7388.53 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. S. Postmaster Louisville, KY 40201 | Postage | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-23-84 | 400.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Kentucky State Treasurer Frankfort, KY 40601 | Payroll Taxes | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-31-84 | 1548.43 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| WHAS-AM 520 W. Chestnut Louisville, KY 40202 | Radio Time | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 590.75 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280 | Contract Labor | | |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-22-84 | 35.18 |
| SUBTOTAL of Disbursements This Page (optional) | | | 20850.04 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Performance Business Forms P. O. Box 100770 Nashville, TN 37210 | Purpose of Disbursement Office Supplies | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-04-84 | 649.25 |
| B. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Purpose of Disbursement Salary | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-15-84 | 514.17 |
| C. Full Name, Mailing Address and ZIP Code Allen-Martin Video Prod. 9701 Taylorsville Road Jeffersontown, KY 40299 | Purpose of Disbursement Dubbing Tapes | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-04-84 | 95.10 |
| D. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-06-84 | 156.85 |
| E. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, Ky 40220 | Purpose of Disbursement Travel Reimbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-31-84 | 135.00 |
| F. Full Name, Mailing Address and ZIP Code Commissioners of the Sinking 617 W. Jefferson Street Louisville, Ky 40202 | Purpose of Disbursement Fund Payroll Taxes | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-31-84 | 850.84 |
| G. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Avenue Louisville, Ky 40205 | Purpose of Disbursement Salary | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-30-84 | 92.27 |
| H. Full Name, Mailing Address and ZIP Code U. S. Postmaster Louisville, Ky 40201 | Purpose of Disbursement Postage | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-26-84 | 100.00 |
| I. Full Name, Mailing Address and ZIP Code Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Purpose of Disbursement Contract Labor | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-30-84 | 500.00 |
| SUBTOTAL of Disbursements This Page (Optional) | | | 3093.48 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Kentucky State Treasurer Frankfort, KY 40601 | Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-04-84 | 3.40 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| WSTO-FM/WVJS-AM Box 1828 Owensboro, KY 42301 | Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 458.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| WAMZ-FM 520 W. Chestnut Louisville, KY 40202 | Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 850.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janice Monroe 2825 Lexington Road Box 1130 Louisville, KY 40280 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 46.90 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233 | Office equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-06-84 | 347.97 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt. 847 Louisville, KY 40291 | Petty Cash Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-20-84 | 177.28 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Americall, Louisville 1000 Shelbyville Road Suite 110 Anchorage, KY 40223 | Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-04-84 | 745.79 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P. O. Box 32440 Louisville, KY 40232 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-06-84 | 1189.61 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Mike Shea 4601 Lincoln Road Louisville, KY 40220 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 15.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3833.95 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 12 of 15 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Commissioners of the Sinking Fund 617 West Jefferson Street Louisville, KY 40202 | Payroll Taxes | 10-31-84 | 79.52 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205 | Expense Reimbursement | 10-30-84 | 12.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | Printing | 10-19-84 | 197.35 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| U.S. Postmaster Louisville, KY 40201 | Postage | 10-31-84 | 260.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Mr. Terry Wallingford 3974 Yearling Court Cincinnati, OH 45211 | Contract Labor | 10-25-84 | 102.18 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| WBKR-FM/WOMI-AM 3121 Frederica Owensboro, KY 42301 | Radio Time | 11-03-84 | 722.50 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| Mr. Steve Mobley 7104 Bearcrkke, A-3 Louisville, KY 40207 | Salary | 10-30-84 | 790.42 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| WAKY/WVEZ 558 S. Fourth Avenue Louisville, KY 40202 | Radio Time | 11-03-84 | 1020.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | Media | 10-22-84 | 57000.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 60183.97 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 13 of 16 for
 LINE NUMBER 17
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|--|--|---|
| A. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assoc. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-06-84 | Amount of Each Disbursement This Period 4481.31 |
| B. Full Name, Mailing Address and ZIP Code Americall, Louisville 10000 Shelbyville Road Anchorage, KY 40223 | Purpose of Disbursement Long Distance Calls Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-06-84 | Amount of Each Disbursement This Period 1069.12 |
| C. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-19-84 | Amount of Each Disbursement This Period 990.06 |
| D. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers 433 East Market Street Louisville, KY 40202 | Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 725.69 |
| E. Full Name, Mailing Address and ZIP Code Mr. Mike Shea 4601 Lincoln Road Louisville, Ky 40220 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-09-84 | Amount of Each Disbursement This Period 1127.70 |
| F. Full Name, Mailing Address and ZIP Code Columbia Press, Inc. P. O. Box 346 Columbus, IN 47202 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 110.00 |
| G. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 153.62 |
| H. Full Name, Mailing Address and ZIP Code Express Press 4400 Bishop Lane Louisville, KY 40218 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-23-84 | Amount of Each Disbursement This Period 290.22 |
| I. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 11-01-84 | Amount of Each Disbursement This Period 500.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 9447.72 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 14 of 16 for
 LINE NUMBER 37
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)
 McConnell Senate Committee

| | | | |
|--|---|--|--|
| A. Full Name, Mailing Address and ZIP Code Ms. Beck Worchester 2831 Bexley Court Louisville, KY 40206 | Purpose of Disbursement Contract Labor | Date (month, day, year) 10-22-84 | Amount of Each Disbursement This Period 117.25 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code WPAD/Am/WDDJ/FM P. O. Box 450 Paducah, KY 42001 | Purpose of Disbursement Radio Time | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 520.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| C. Full Name, Mailing Address and ZIP Code Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Purpose of Disbursement Salary | Date (month, day, year) 11-15-84 | Amount of Each Disbursement This Period 790.42 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| D. Full Name, Mailing Address and ZIP Code WCII-AM/WKJJ-FM 307 Muhammad Ali Blvd. Louisville, KY 40202 | Purpose of Disbursement Radio Time | Date (month, day, year) 11-03-84 | Amount of Each Disbursement This Period 1436.50 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| E. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN | Purpose of Disbursement Media | Date (month, day, year) 10-24-84 | Amount of Each Disbursement This Period 28000.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code Pitney Bowes P. O. Box 38390 Louisville, KY 40233 | Purpose of Disbursement Office Equipment | Date (month, day, year) 11-04-84 | Amount of Each Disbursement This Period 270.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt. 3 Louisville, KY 40218 | Purpose of Disbursement Salary | Date (month, day, year) 10-30-84 | Amount of Each Disbursement This Period 108.53 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code South Central Bell P. O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones | Date (month, day, year) 10-30-84 | Amount of Each Disbursement This Period 1541.89 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code John Conti Company P. O. Box 18289 | Purpose of Disbursement Office Supplies | Date (month, day, year) 11-04-84 | Amount of Each Disbursement This Period 62.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 32846.59 |
| TOTAL This Period (last page, this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 15 of 16 for
LINE NUMBER 17
(Use separate schedule(s) for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (In Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Ms. Donna Cottrell 49 Place Janue Louisville, KY 40203 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-22-84 | 103.01 |
| Mr. Jack Telle 2215 Talbott Avenue Louisville, KY 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-15-84 | 92.27 |
| Express Press 4400 Bishop Lane Louisville, Ky 40218 | Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-26-84 | 89.72 |
| U. S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-01-84 | 200.00 |
| Ms. Victoria Hensley 11 Mason Court Villa Hills, KY 41016 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-25-84 | 40.20 |
| Ms. Becky Worchester 2831 Bexley Court Louisville, KY 40206 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 117.25 |
| Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, Ky 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-30-84 | 97.69 |
| WDXR-AM 1 Executive Blvd. Paducah, KY 42001 | Radio Time Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-03-84 | 256.00 |
| Mr. Steve Mobley 7104 Bearcreek, A-3 Louisville, KY 40207 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-20-84 | 318.53 |
| SUBTOTAL of Disbursements This Page (optional) | | | 1314.67 |
| TOTAL This Period (last page this line number only) | | | |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 16 of 16 for
LINE NUMBER 17
(Use separate schedules for each
category of the Detailed
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| | | | |
|--|---|----------------------------|--|
| A. Full Name, Mailing Address and ZIP Code Natl. Rep. Sen. Committee 404 C. Street, N.E. Washington, D.C. 20002 | Purpose of Disbursement Reimburse for Expenses | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-31-84 | 12999.00 |
| B. Full Name, Mailing Address and ZIP Code The Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | Purpose of Disbursement Media | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-26-84 | 38243.00 |
| C. Full Name, Mailing Address and ZIP Code Ms. Debbie Ratliff 8611 Attu Lane Louisville, KY 40291 | Purpose of Disbursement Contract Labor | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-22-84 | 113.06 |
| D. Full Name, Mailing Address and ZIP Code Mr. Duffy L. Ford 200 South Second Street Richmond, KY 40475 | Purpose of Disbursement In-Kind-Advertising | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-26-84 | 249.10 |
| E. Full Name, Mailing Address and ZIP Code Mr. Neil Huffman 7501 Hunting Creek Drive Prospect, KY 40059 | Purpose of Disbursement In-Kind-Campaign Car | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-26-84 | 50.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Jimmy A. Kincer 15025 Bircham Road Louisville, KY 40243 | Purpose of Disbursement In-Kind-Office Equipment | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-26-84 | 87.50 |
| G. Full Name, Mailing Address and ZIP Code Mrs. Joyce Kincer 15025 Bircham Road Louisville, KY 40243 | Purpose of Disbursement In-Kind-Office Equipment | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 10-26-84 | 137.50 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 51879.16 |
| TOTAL This Period (last page this line number only) | | | 311377.43 |

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
 LINE NUMBER 19(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | AMOUNT of Each Disbursement This Period |
|--|---|-------------------------|---|
| Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | Loan Repayment | 11-19-84 | 15000.00 |
| | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | AMOUNT of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | AMOUNT of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 15000.00 |
| TOTAL This Period (last page this line number only) | | | 15000.00 |

84020280983

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
 LINE NUMBER 20(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|---------------------------------|---|
| Mr. J. H. Thornton Route 4 Iron Works Pike Georgetown, KY 40324 | Refund for over over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-26-84 | 1000.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mrs. J. N. Clevenger 6536 High Drive Mission Hills, KS 66208 | refund for over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-26-84 | 1000.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Mary E. Dudla 34 Werner Road Clifton Park, NY 12065 | refund for over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-26-84 | 1000.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mr. Gene LaCroix 1700 Park Shore Road LaGrange, Ky 40031 | refund for over contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-26-84 | 590.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sarah Korein 240 Central Park New York, NY 10019 | refund for over contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-26-84 11-26-84 | 100.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | |
| SUBTOTAL of Disbursements This Page (optional) | | | 3 690.00 |
| TOTAL This Period (last page this line number only) | | | 3 690.00 |

84020280984

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 1 for
 LINE NUMBER 21
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Western Union Telegraph Co. P. O. Box 101250 Atlanta, GA 30392 | Telegrams Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-06-84 | 13815.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 13,815.00 |
| TOTAL This Period (list page this line number only) | | | 13,815.00 |

84020280905

ROPAK

840202 0098

PLEASE PRINT NAME AND ADDRESS HERE

COLLECT

☐ 038-34328534

| | |
|---------------------------------------|------|
| AIR • PUROLETTER • PUROPAK | |
| SHIPMENT CONTROL LABEL | |
| THIS PACKAGE WAS BRANDED TO YOU BY | |
| POSTAGE | PAID |
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FIRST CLASS MAIL

TOUCHE ROSS & CO.
510 WEST BROADWAY
LOUISVILLE, KY. 40202

TO:

Secretary of the Senate
119 D Street, N.E.
Washington, D.C. 20510

THE UNIVERSITY OF CHICAGO

13

Date of Receipt

Date of Receipt.

Date of Receipt

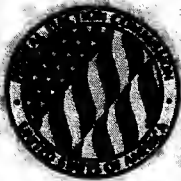
Date Of Receipt

NO POSTMARK

OTHER _____ POSTMARK _____

AND OR DATE OF RECEIPT

7987



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

JAN 3 1985

RQ-2

Larry J. Steinberg, Treasurer
McConnell Senate Committee
P.O. Box 1496
Louisville, KY 40201

Identification Number: C00155051

Reference: 30 Day Post-General Report (10/18/84-11/26/84)

Dear Mr. Steinberg:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-When a committee reports receiving a loan from the candidate, it is necessary to clarify whether or not the candidate used his/her personal funds or borrowed the money from a lending institution, or any other source. If the candidate borrowed funds from a lending institution or any other source, please provide the name of the lending institution and the complete terms of the loan. If the loan(s) was from personal funds, please acknowledge that fact in an amendment to this report. Further, it is important to note that "personal funds" is strictly defined by Commission regulations and may be found in 11 CFR 110.10. (11 CFR 100.7(a)(1) and 104.3(d))

An amendment to your original report(s) correcting the above problem(s) should be filed with the Secretary of the Senate, 232 Hart Senate Office Building, Washington, DC 20510 within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 523-4048.

Sincerely,

Robin Kelly

Robin Kelly
Reports Analyst
Reports Analysis Division

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ailes Communications 456 W. 43rd Street New York, NY 10036 | 25,000 | | | 25,000 |
| Nature of Debt (Purpose): Communications Training | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Senator Mitch McConnell 120 Russell Senate Office Bldg. Washington, D.C. 20510 | 908 | | 908 | |
| Nature of Debt (Purpose): Airplane Tickets | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor South Central Bell P. O. Box 32440 Louisville, KY 40232 | 2,565 | 1,373 | 3,938 | |
| Nature of Debt (Purpose): Telephone Service | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor K. S. Air, Inc. P. O. Box 7183 Louisville, KY 40207 | 833 | 487 | 1,320 | |
| Nature of Debt (Purpose): Airplane Tickets | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes Credit Corp. P. O. Box 38460 Louisville, KY 40233 | 696 | | 696 | |
| Nature of Debt (Purpose): Office Equipment Rental | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mr. Steve Gordon 1950 Morgan Avenue St. Paul, MN 55116 | 2,097 | | 2,097 | |
| Nature of Debt (Purpose): Travel Reimbursement | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 25,000 |
| 2) TOTAL This Period (last page this line only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | |

95020020101

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

| Name of Committee (in Full) | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|--|---|-----------------------------------|---------------------------|---|
| McConnell Senate Committee | | | | |
| A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Columbia Press, Inc. P. O. Box 346 Columbus, IN 47202 | 3,847 | | 3,847 | |
| Nature of Debt (Purpose): Printing | | | | |
| B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Perkins Group, Inc. P. O. Box 50190 Indianapolis, IN 46250 | 4,138 | 7,240 | | 11,378 |
| Nature of Debt (Purpose): Media | | | | |
| C. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| D. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| E. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| F. Full Name, Mailing Address and Zip Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 11,378 |
| 2) TOTAL This Period (last page this line only) | | | | 36,378 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | 36,378 |

9502002002

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 3 for
 LINE NUMBER 11 (a)
 (Use separate schedules for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|--|--|--|
| Name of Committee (in Full) <u>McConnell Senate Committee</u> | | | |
| A. Full Name, Mailing Address and ZIP Code <u>Mr. Donald Geary</u> <u>1501 E. Second</u> <u>P. O. Drawer D</u> <u>Centralia, IL 62801</u> | Name of Employer <u>Geary Construction Co.</u> Occupation <u>Owner</u> | Date (month, day, year) <u>12-05-84</u> | Amount of Each Receipt this Period <u>250.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ <u>250.00</u> | | |
| B. Full Name, Mailing Address and ZIP Code <u>Mr. Wade H. Jefferson, III</u> <u>400 East Main Street</u> <u>Lexington, KY 40507</u> | Name of Employer <u>self</u> Occupation <u>Real Estate</u> | Date (month, day, year) <u>11-29-84</u> | Amount of Each Receipt This Period <u>50.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ <u>250.00</u> | | |
| C. Full Name, Mailing Address and ZIP Code <u>Mr. James H. Adams</u> <u>1545 Wilshire Boulevard</u> <u>Los Angeles, CA 90017</u> | Name of Employer <u>self</u> Occupation <u>real estate</u> | Date (month, day, year) <u>12-05-84</u> | Amount of Each Receipt This Period <u>30.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ <u>280.00</u> | | |
| D. Full Name, Mailing Address and ZIP Code <u>Mr. G. E. Taylor</u> <u>P. O. Box 575</u> <u>Bridgeport, TX 76026</u> | Name of Employer <u>none</u> Occupation <u>self employed</u> | Date (month, day, year) <u>11-29-84</u> | Amount of Each Receipt This Period <u>100.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ <u>350.00</u> | | |
| E. Full Name, Mailing Address and ZIP Code <u>Mr. Henry Upham Harris</u> <u>55 Brookville Road</u> <u>Glen Head, NY 11545</u> | Name of Employer <u>none</u> Occupation <u>Retired</u> | Date (month, day, year) <u>12-13-84</u> | Amount of Each Receipt This Period <u>50.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ <u>300.00</u> | | |
| F. Full Name, Mailing Address and ZIP Code <u>Mrs. Joyce Kincer</u> <u>15025 Bircham Road</u> <u>Louisville, KY 40243</u> | Name of Employer <u>STM</u> Occupation <u>executive secretary</u> | Date (month, day, year) <u>12-31-84</u> | Amount of Each Receipt This Period <u>450.00</u> <u>In-Kind Office Equipment</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ <u>587.50</u> | | |
| G. Full Name, Mailing Address and ZIP Code <u>Mr. James H. Barr</u> <u>218 Choctaw Road</u> <u>Louisville, KY 40207</u> | Name of Employer <u>Federal Government</u> Occupation <u>U. S. Attorney</u> | Date (month, day, year) <u>12-05-84</u> | Amount of Each Receipt This Period <u>100.00</u> |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date--\$ <u>350.00</u> | | |
| SUBTOTAL of Receipts This Page (optional) | | | <u>1030.00</u> |
| TOTAL This Period (last page this line number only) | | | |

850200203

SCHEDULE A

ITEMIZED RECEIPTS

Page 2 of 3 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|----------------------------|-------------------------|------------------------------------|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Mrs. Lillian A. Hart Route 2 Falmouth, KY 41040 | USDA-ASES | 11-27-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation St. Director | | |
| | Aggregate Year-to-Date-\$ | 280.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Walker Peddicord 860 Broadmoor Court Lafayette, CA 94549 | none | 12-05-84 | 25.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | | |
| | Aggregate Year-to-Date-\$ | 205.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. Charles H. Brunie 1 New York Plaza New York, NY 10004 | Oppenheimer Capital Corp. | 12-05-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation chairman | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. Daryl Harvey Route 6, Box 1-C Glasgow, KY 42141 | self | 11-27-84 | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation M. D. | | |
| | Aggregate Year-to-Date-\$ | 280.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. W. B. Lawton Route 5, Box 3610 Sulphur, LA 70663 | Self-Employed | 11-27-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Farmer | | |
| | Aggregate Year-to-Date-\$ | 275.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Dr. George F. Hromyak, Jr. 801 Browns Ferry Road Frankfort, KY 40601 | self | 11-30-84 | 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Radiologist | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Mr. O. H. Delchamps, Jr. P.O. 1668 Mobile, AL 36601 | Delchamps, Inc. | 12-05-84 | 50.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Corp Exec. | | |
| | Aggregate Year-to-Date-\$ | 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 1335.00 |
| TOTAL This Period (last page this line number only) | | | |

85020020304

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 3 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

| Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|---|---|--|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code Mr. Robert J. McCallum 5758 Chester Court Mobile, AL 36609 | Name of Employer Delchamps, Inc. | Date (month, day, year) 11-27-84 | Amount of Each Receipt this Period 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation executive | Aggregate Year-to-Date--\$ 230.00 | |
| B. Full Name, Mailing Address and ZIP Code Mr. Caldwell R. Willig 1800 Mayo Lane Prospect, KY 40059 | Name of Employer ITS, Inc. | Date (month, day, year) 12-13-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation executive | Aggregate Year-to-Date--\$ 1100.00 | |
| C. Full Name, Mailing Address and ZIP Code Mrs. Edna C. Edmondson 1709 Beverly Hills St. Norman, OK 73069 | Name of Employer none | Date (month, day, year) 12-05-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation retired | Aggregate Year-to-Date--\$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Judge Henry Meigs 417 Wapping Street Frankfort, KY 40601 | Name of Employer Information Requested | Date (month, day, year) 12-13-84 | Amount of Each Receipt This Period 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Information Requested | Aggregate Year-to-Date--\$ 1000.00 | |
| E. Full Name, Mailing Address and ZIP Code Mr. Michael Schwartz 15 Newkirk Avenue East Rockaway, NY 11518 | Name of Employer L. F. Rothschild, Unterberg, Ton | Date (month, day, year) 12-04-84 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner, Managing Director | Aggregate Year-to-Date--\$ 250.00 | |
| F. Full Name, Mailing Address and ZIP Code Mr. William T. Wright 11800 124th Ave., NE Kirkland, WA 98033 | Name of Employer Self | Date (month, day, year) 12-20-84 | Amount of Each Receipt This Period 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Auto Dealer | Aggregate Year-to-Date--\$ 230.00 | |
| G. Full Name, Mailing Address and ZIP Code Mr. Robert Yoder Route 1, Box 169 Guthrie, KY 42234 | Name of Employer Self-Employed | Date (month, day, year) 12-05-84 | Amount of Each Receipt This Period 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Farmer | Aggregate Year-to-Date--\$ 205.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 2590.00 |
| TOTAL This Period (last page this line number only) | | | 4955.00 |

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 5 for
 LINE NUMBER 11 (C)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

National Restaurant Association
311 First Street, N.W.

Washington, DC 20001

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

12-13-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

B. Full Name, Mailing Address and ZIP Code

TORCHMARK Corporation (PAC)
c/o R. K. Richey, President
2001 Third Avenue South
Birmingham, AL 35233

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-20-84

2000.00

Occupation

Aggregate Year-to-Date-\$ 2000.00

C. Full Name, Mailing Address and ZIP Code

HI/PAC Holliday Inns, Inc.
c/o Richard Ashman, Treasurer
3742 Lamar Avenue
Memphis, TN 38195

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-10-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Jerrico Political Action Com.
101 Jerrico Drive

Lexington, KY 40511

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-13-84

1000.00

Occupation

Aggregate Year-to-Date-\$ 1000.00

E. Full Name, Mailing Address and ZIP Code

Nursery Industry PAC
c/o John S. Satagaj, Director
1250 I St., N. W. Suite 500
Washington, DC 20005

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-30-84

100.00

Occupation

Aggregate Year-to-Date-\$ 100.00

F. Full Name, Mailing Address and ZIP Code

BankPac
c/o Mr. Brian Meyer, Treasurer
1120 Connecticut Avenue, N.W.
Washington, DC 20036

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-29-84

5000.00

Occupation

Aggregate Year-to-Date-\$ 5000.00

G. Full Name, Mailing Address and ZIP Code

O'Melveny & Myers PAC
c/o Mr. Donald T. Bliss
1800 M Street, N.W.
Washington, DC 20036

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-05-84

500.00

Occupation

Aggregate Year-to-Date-\$ 500.00

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

9502002006

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Page 3 of 5 for
 LINE NUMBER 11(c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---------------------------|-------------------------|------------------------------------|
| Union Oil Pol. Awareness Fund c/o Mr. H. P. Shawlee, Chairman Room M-01, 461 S. Boylston Street Los Angeles, CA 90017 | | 12-13-84 | 2000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | 2000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Chevron PAC 225 Bush Street Room 1706 San Francisco, CA 94104 | | 12-20-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | 1000.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| I Love America Committee 303-6th Street Lynchburg, VA 24504 | | 12-31-84 | 2420.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | In-Kind Postage |
| | Aggregate Year-to-Date—\$ | 4051.82 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| MEBA Political Action Fund 444 North Capitol Street Suite 800 Washington, DC 20001 | | 12-20-84 | 2500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | 2500.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| R.P.A.C. c/o Mr. Jack Carlson 430 North Michigan Avenue Chicago, IL 60611 | | 12-11-84 | 5000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | 8000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Wholesale-Distributor PAC c/o Nicholas E. Calio, Exec. Dir. 1725 K Street, Northwest Washington, DC 20006 | | 12-10-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date—\$ | 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| I Love America Committee 303-6th Street Lynchburg, VA 24504 | | 12-31-84 | 1431.82 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | In-Kind Printing-Stationery |
| | Aggregate Year-to-Date—\$ | 4051.82 | |
| SUBTOTAL of Receipts This Page (optional) | | | 15351.82 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 4 of 5 for
 LINE NUMBER 11(a)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---------------------------|-------------------------|------------------------------------|
| Ryder Com. for Effective Govt. C/O Daniel K. O'Connell, Chair. P. O. Box 520816 Miami, FL 33152 | | 12-11-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Independent Ins. Agents Of America, Inc. PAC 600 Pennsylvania Ave, SE Ste. 200 Washington, DC 20003 | | 12-13-84 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 500.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| FED PAC c/o Ms. Cindy Williams 1111 19th Street, N.W. Washington, DC 20036 | | 12-11-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Interstate Natural Gas Assoc. C/O Jerry Verkler, Treasurer 1660 L. Street, N.W. Suite 601 Washington, DC 20036 | | 12-20-84 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 250.00 | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Morrison's Political Action Com. c/o Pfilip G. Hunt, Chairman P. O. Box 160266 Mobile, AL 36625 | | 12-20-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Sunbelt Good Govt. Com/Winn-Dixie c/o Mr. Glen P. Woodard Box "B" Jacksonville, FL 32203 | | 12-20-84 | 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | |
| | Aggregate Year-to-Date-\$ | 1000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
| Fund for a Conservative Majority Mr. Robert C. Heckman, Chairman 302 Fifth Street, N.E. Washington, D.C. 20002 | | 10-18-84 | 234.63 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | 11-6-84 | 10.00 |
| | Aggregate Year-to-Date-\$ | In Kind - Printing | |
| | Aggregate Year-to-Date-\$ | 3,771.59 | |
| SUBTOTAL of Receipts This Page (optional) | | | 4994.63 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Page 5 of 5 for
LINE NUMBER II(c)
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

Printing Industries of America PAC
 1730 North Lynn Street
 Arlington, VA 22209

Name of Employer

Date (month,
 day, year)
 12-11-84
 In kind

Amount of Each
 Receipt this Period
 826.17
 Luncheon

Occupation

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Aggregate Year-to-Date—\$826.17

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
 day, year)

Amount of Each
 Receipt This Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date—\$

SUBTOTAL of Receipts This Page (optional)

826.17

TOTAL This Period (last page this line number only)

41,472.62

95020027310

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for
 LINE NUMBER 15
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

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Name of Committee (in Full)

McConnell Senate Committee

| | | | | |
|--|--|------------------------------------|---|---|
| A. Full Name, Mailing Address and ZIP Code Liberty National Bank DO NOT MAIL Louisville, KY 40201 | | Name of Employer Occupation | Date (month, day, year) 12-04-84 | Amount of Each Receipt this Period .77 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ 12043.01 | | |
| B. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ | | |
| C. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ | | |
| D. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ | | |
| E. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ | | |
| F. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ | | |
| G. Full Name, Mailing Address and ZIP Code | | Name of Employer Occupation | Date (month, day, year) | Amount of Each Receipt This Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Aggregate Year-to-Date-\$ | | |
| **TOTAL of Receipts This Page (optional). | | | | .77 |
| s Period (last page this line number only) | | | | .77 |

8502002031

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 8
LINE NUMBER

(Use separate schedule(s) for each category of the Detailed Summary Page)

Line: 17

Page 1 of 8

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-30-84 | 388.36 |
| B. Full Name, Mailing Address and ZIP Code Federal Express Corporation P.O. Box 727 Dept A Memphis, TN 38194 | Purpose of Disbursement Delivery Charges Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 33.00 |
| C. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt. 3 Louisville, KY 40218 | Purpose of Disbursement salary Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-21-84 | 434.15 |
| D. Full Name, Mailing Address and ZIP Code Pitney Bowes Credit Corporation P.O. Box 38460 Louisville, KY 40233 | Purpose of Disbursement Office Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 695.94 |
| E. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-30-84 | 459.61 |
| F. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | Purpose of Disbursement Bulk Rate Permit Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 115.00 |
| G. Full Name, Mailing Address and ZIP Code AT&T Information Systems 9300 Shelbyville Road Suite 300 Louisville, KY 40222 | Purpose of Disbursement Phones Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 416.00 |
| H. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-14-84 | 388.36 |
| I. Full Name, Mailing Address and ZIP Code Paversham World Travel 2843 Brownsboro Road Louisville, KY 40206 | Purpose of Disbursement travel Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-17-84 | 510.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3440.42 |
| TOTAL This Period (on page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for

LINE NUMBER

(Use separate schedule(s) for each category of the Detailed Summary Page)

Line: 17

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Liberty National Bank P.O. Box 32500 Louisville, KY 40232 | Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 2938.40 |
| B. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-30-84 | 514.17 |
| C. Full Name, Mailing Address and ZIP Code Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY 40220 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-14-84 | 459.61 |
| D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Louisville, KY 40201 | postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 5000.00 |
| E. Full Name, Mailing Address and ZIP Code Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299 | Dubs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 28.00 |
| F. Full Name, Mailing Address and ZIP Code Mr. Terry Carmack 3201 Leith Lane Apartment 715 Louisville, KY 40218 | salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-21-84 | 388.36 |
| G. Full Name, Mailing Address and ZIP Code Mr. Steve Gordon 1950 Morgan Avenue Saint Paul, MN 55116 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 2096.52 |
| H. Full Name, Mailing Address and ZIP Code Main Travel Agency, Inc. 730 W. Main Street Louisville, KY 40202 | Plane Fare Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-10-84 | 330.00 |
| I. Full Name, Mailing Address and ZIP Code Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY 40291 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-14-84 | 514.17 |
| SUBTOTAL of Disbursements This Page (optional) | | | 12269.23 |
| TOTAL This Period (use page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
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 category of the Detailed
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|--|---|-------------------------|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Joan Steurer 4222 Brookhaven Ave. Louisville, KY-40220 | salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-21-84 | 459.61 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-21-84 | 1420.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Allen-Martin Video Productions 9701 Taylorsville Road Jeffersontown, KY 40299 | Radio Production Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 341.31 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Copy-Corp. 10420 Bluegrass Pkwy. Jeffersontown, KY-40299 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 31.88 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Internal Revenue Service Internal Revenue Service Center Memphis, TN 37501 | Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 202.90 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-30-84 | 425.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sharon Pierce 5609 Oxford, Apt 847 Louisville, KY-40291 | salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-21-84 | 514.17 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| State Farm Insurance 760 N.W. Broad Street Murfreesboro, TN 37131 | Insurance Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-05-84 | 25.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Victoria Williams 6703 Ashmeade Drive Louisville, KY 40291 | Contract Labor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-03-84 | 250.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3669.87 |
| TOTAL This Period (Use page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 4 of 8
 LINE NUMBER
 (Use separate schedule(s) for each category of the Detailed Summary Page)

Line: 17

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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Americall, Louisville 10000 Shelbyville Rd Suite 110 Anchorage, KY 40223 | phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-17-84 | 1288.78 |
| B. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Purpose of Disbursement Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 832.61 |
| C. Full Name, Mailing Address and ZIP Code Ms. Janet Mullins 1249 Everett Ave. Louisville, KY 40204 | Purpose of Disbursement Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-03-84 | 179.60 |
| D. Full Name, Mailing Address and ZIP Code Palm Beach Plaza Center Assos. 1941 Bishop Lane, Suite 406 Louisville, KY 40218 | Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 2024.69 |
| E. Full Name, Mailing Address and ZIP Code WHAS-AM 520 W. Chestnut Louisville, KY 40202 | Purpose of Disbursement Production Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 60.00 |
| F. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-30-84 | 434.15 |
| G. Full Name, Mailing Address and ZIP Code Columbia Press, Inc. P. O. Box 346 Columus, IN 47202 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 3180.00 |
| H. Full Name, Mailing Address and ZIP Code K. S. Air, Inc. 4510 Mt. Vernon Road Louisville, KY 40220 | Purpose of Disbursement Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 487.50 |
| I. Full Name, Mailing Address and ZIP Code Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | Purpose of Disbursement travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-17-84 | 908.00 |
| SUBTOTAL of Disbursements This Page (optional) | | | 9395.33 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

LINE NUMBER _____
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Name of Committee (in Full)

McConnell Senate Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Mr. Jack Prewitt P.O. Box 206 Liberty, KY 42539 | Airplane Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 100.00 |
| B. Full Name, Mailing Address and ZIP Code Ms. Susan Ballard 3629 Fountain Drive, Apt 3 Louisville, KY 40218 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-14-84 | 434.15 |
| C. Full Name, Mailing Address and ZIP Code Columbia Press, Inc. P. O. Box 346 Columus, IN 47202 | Purpose of Disbursement Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 667.15 |
| D. Full Name, Mailing Address and ZIP Code Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601 | Purpose of Disbursement clipping service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-17-84 | 176.63 |
| E. Full Name, Mailing Address and ZIP Code Mr. Mitch McConnell Jefferson County Courthouse Louisville, KY 40202 | Purpose of Disbursement travel reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-17-84 | 72.50 |
| F. Full Name, Mailing Address and ZIP Code South Central Bell P.O. Box 32440 Louisville, KY 40232 | Purpose of Disbursement Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-05-84 | 1624.83 |
| G. Full Name, Mailing Address and ZIP Code Mr. Jack Telle 2215 Talbott Ave. Louisville, KY 40205 | Purpose of Disbursement Expense Reimburse- ment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 54.00 |
| H. Full Name, Mailing Address and ZIP Code Xerox 1250 Fairwood Ave. Columbus, OH 43267 | Purpose of Disbursement Maintenance Agree- ment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 382.47 |
| I. Full Name, Mailing Address and ZIP Code Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202 | Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 122.01 |
| SUBTOTAL of Disbursements This Page (optional) | | | 3633.74 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 6 of 8 for
 LINE NUMBER
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 6 of 8

| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | |
|--|--|--------------------------------|--|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Druskin Greyhound Printing Co. 47 Glenwood Avenue Minneapolis, MN 55403 | printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-21-84 | 473.82 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Kentucky Press Service, Inc 332 Capitol Ave. Frankfort, KY 40601 | Clipping Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 239.22 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Morgan Equipment Company P.O. Box 7802 San Francisco, CA 94120 | Expense Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-19-84 | 320.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| South Central Bell P.O. Box 32440 Louisville, KY 40232 | Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-13-84 | 939.90 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| U.S. Postmaster Louisville, KY 40201 | Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-03-84 | 300.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Commercial Office Suppliers, Inc 433 East Market Street Louisville, KY 40202 | Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 36.23 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Express Press 4400 Bishop Lane Louisville, KY 40218 | printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 2741.34 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 11-30-84 | 390.76 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Office Products Clearance Center P.O. Box 1679 Louisville, KY 40201 | Furniture Rental Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | 12-20-84 | 285.86 |
| SUBTOTAL of Disbursements This Page (optional) | | | 5727.13 |
| TOTAL This Period (on page this line number only) | | | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
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Name of Committee (in Full)

McConnell Senate Committee

A. Full Name, Mailing Address and ZIP Code

South Central Bell
 P.O. Box 32440

Purpose of Disbursement

Phones

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-13-84

74.29

Louisville, KY 40232

B. Full Name, Mailing Address and ZIP Code

U.S. Postmaster

Purpose of Disbursement

Postage

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-03-84

300.00

Louisville, KY 40201

C. Full Name, Mailing Address and ZIP Code

John Conti Company
 P.O. Box 18289

Purpose of Disbursement

Office Supplies

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-13-84

62.00

Louisville, KY 40218

D. Full Name, Mailing Address and ZIP Code

Federal Express Corporation
 P.O. Box 727 Dept A

Purpose of Disbursement

Delivery Charges

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-10-84

20.50

Memphis, TN 38194

E. Full Name, Mailing Address and ZIP Code

Ms. Sara Kent Lemonds
 2326 Broadmeade Road

Purpose of Disbursement

Salary

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-14-84

390.76

Louisville, KY 40205

F. Full Name, Mailing Address and ZIP Code

Performance Business Forms
 P.O. Box 100770

Purpose of Disbursement

Office Supplies

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-13-84

399.00

Nashville, TN 37210

G. Full Name, Mailing Address and ZIP Code

South Central Bell
 P.O. Box 32440

Purpose of Disbursement

Phones

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-20-84

1298.59

Louisville, KY 40232

H. Full Name, Mailing Address and ZIP Code

U.S. Postmaster

Purpose of Disbursement

Postage

Date (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-03-84

50.00

Louisville, KY 40201

I. Full Name, Mailing Address and ZIP Code

I Love America Committee
 303-6th Street

Purpose of Disbursement

In-Kind
PostageDate (month,
day, year)Amount of Each
Disbursement This Period

Disbursement for: ☐ Primary ☒ General
☐ Other (specify):

12-31-84

2420.00

Lynchburg, VA 24504

SUBTOTAL of Disbursements This Page (optional)

5015.14

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page ____ of ____ for
 LINE NUMBER ____
 (Use separate schedule(s) for each
 category of the Detailed
 Summary Page)

Line: 17

Page 8 of 8

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|--|---|---|---|
| Name of Committee (in Full) | | | |
| McConnell Senate Committee | | | |
| A. Full Name, Mailing Address and ZIP Code I Love America Committee 303-6th Street Lynchburg, VA 24504 | Purpose of Disbursement In-Kind Printing-Stationery Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12-31-84 | Amount of Each Disbursement This Period 1431.82 |
| B. Full Name, Mailing Address and ZIP Code Mrs. Joyce Kincer 15025 Bircham Road Louisville, KY 40243 | Purpose of Disbursement In-Kind Office Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12-31-84 | Amount of Each Disbursement This Period 450.00 |
| C. Full Name, Mailing Address and ZIP Code Ms. Sara Kent Lemonds 2326 Broadmeade Road Louisville, KY 40205 | Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12-21-84 | Amount of Each Disbursement This Period 390.76 |
| D. Full Name, Mailing Address and ZIP Code Printing Industries of America PAC 1730 North Lynn Street Arlington, VA 22209 | Purpose of Disbursement In-Kind Luncheon Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 12-11-84 | Amount of Each Disbursement This Period 826.17 |
| E. Full Name, Mailing Address and ZIP Code Fund for a Conservative Majority Mr. Robert C. Heckman, Chairman 302 Fifth Street, N.E. Washington, D.C. 20002 | Purpose of Disbursement In-Kind Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 10-18-84 11-6-84 | Amount of Each Disbursement This Period 234.63 10.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement This Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 3,343.38 |
| TOTAL This Period (last page this line number only) | | | 46,494.24 |

ALICIA MAE FISHER
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, D.C. 20510
PHONE: 202-224-0322

United States Senate

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